

NAVAL POSTGRADUATE SCHOOL

MONTEREY, CALIFORNIA

THESIS

AN ANALYSIS OF THE USE OF MEDICAL APPLICATIONS REQUIRED FOR COMPLEX HUMANITARIAN DISASTERS OR EMERGENCIES VIA HASTILY FORMED NETWORKS (HFN) IN THE FIELD

by

Sean W. Kelley

September 2005

Thesis Advisor: Brian Steckler Second Reader: James Ehlert

Approved for public release; distribution unlimited



REPORT DOCUMENTATION PAGE

Form Approved OMB No. 0704-0188

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instruction, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Washington headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0188) Washington DC 20503.

1. AGENCY USE ONLY	2. REPORT DATE September 2005	3. REPORT TYPE AND DATES COVERED Master's Thesis	
4. TITLE AND SUBTITLE : An Analysis of the Use of Medical Applications Required for Complex Humanitarian Disasters and Emergencies via Hastily Formed Networks (HFN) in the Field			5. FUNDING NUMBERS
6. AUTHOR(S) Sean W. Kelley			
7. PERFORMING ORGANIZATION NAME(S) AND ADDRESS(ES) Naval Postgraduate School Monterey, CA 93943-5000			
Naval Postgraduate School	AME(S) AND ADDRES	SS(ES)	8. PERFORMING ORGANIZATION REPORT NUMBER

11. SUPPLEMENTARY NOTES The views expressed in this thesis are those of the author and do not reflect the official policy or position of the Department of Defense or the U.S. Government.

12a. DISTRIBUTION / AVAILABILITY STATEMENT Approved for public release; distribution unlimited

12b. DISTRIBUTION CODE

13. ABSTRACT (maximum 200 words)

This thesis analyzes the feasibility, efficacy and usability of medical operations working in concert with a Fly-Away-Kit (FLAK) and the forming of Hastily Formed Networks (HFNs) in support of Humanitarian Assistance and Disaster Relief (HA/DR) operations. The initial focus of this research is on the requirements, situation, area of operations, and mission differences between nongovernmental organizations and governmental organizations. The thesis researches and discusses the possibilities for implementing medical technology in the field and the conditions and scenarios in HA/DR that may affect its success. This process will also define the requirements for medical operations as well as facilitate a methodology for ensuring those requirements are met. This thesis investigates the suitability of currently available COTS hardware and software components for medical operations. In addition, it includes a comprehensive review of the value of electronic medical records and telemedicine technologies.

Virtually all organizations responding to the December 26, 2004 Southeast Asia tsunami did not have the benefit of large scale medical information technology. For example, the ability to ascertain the real extent of injuries due to the tsunami was hampered by the lack of a central database. Initial media reports claimed a death toll of over 300,000 people, when in fact hindsight now provides a more accurate tally of just over 200,000 dead. This disparity resulted from an archaic system of tracking and accounting. Undoubtedly, humanitarian medical organizations will greatly benefit from the implementation of medical information technology capabilities. This thesis lays the groundwork for further research into medical technologies that can be deployed in the field with humanitarian medical teams in the near future.

14. SUBJECT TERMS Medica Humanitarian Disasters, NGO, Ele	15. NUMBER OF PAGES 189		
	16. PRICE CODE		
17. SECURITY CLASSIFICATION OF	18. SECURITY CLASSIFICATION OF THIS	19. SECURITY CLASSIFICATION OF	20. LIMITATION OF ABSTRACT
REPORT	OF ABSTRACT		
Unclassified	UL		

NSN 7540-01-280-5500

Standard Form 298 (Rev. 2-89) Prescribed by ANSI Std. 239-18

Approved for public release; distribution unlimited

AN ANALYSIS OF THE USE OF MEDICAL APPLICATIONS REQUIRED FOR COMPLEX HUMANITARIAN DISASTERS AND EMERGENCIES VIA HASTILY FORMED NETWORKS (HFN) IN THE FIELD

Sean W. Kelley
Lieutenant, United States Navy
B.S., Southern Illinois University, 2000
M.A., Webster University, 2001

Submitted in partial fulfillment of the requirements for the degree of

MASTER OF SCIENCE IN INFORMATION TECHNOLOGY MANAGEMENT

from the

NAVAL POSTGRADUATE SCHOOL September 2005

Author: Sean William Kelley

Approved by: Brian Steckler

Advisor

James Ehlert Second Reader

Dan Boger

Chairman, Department of Information Sciences

ABSTRACT

This thesis analyzes the feasibility, efficacy and usability of medical operations working in concert with a Fly-Away-Kit (FLAK) and the forming of Hastily Formed Networks (HFNs) in support of Humanitarian Assistance and Disaster Relief (HA/DR) operations. The initial focus of this research is on the requirements, situation, area of operations, and mission differences between nongovernmental organizations and governmental organizations. The thesis researches and discusses the possibilities for implementing medical technology in the field and the conditions and scenarios in HA/DR that may affect its success. This process will also define the requirements for medical operations as well as facilitate a methodology for ensuring those requirements are met. This thesis investigates the suitability of currently available COTS hardware and software components for medical operations. In addition, it includes a comprehensive review of the value of electronic medical records and telemedicine technologies.

Virtually all organizations responding to the December 26, 2004 Southeast Asia tsunami did not have the benefit of large scale medical information technology. For example, the ability to ascertain the real extent of injuries due to the tsunami was hampered by the lack of a central database. Initial media reports claimed a death toll of over 300,000 people, when in fact hindsight now provides a more accurate tally of just over 200,000 dead. This disparity resulted from an archaic system of tracking and accounting. Undoubtedly, humanitarian medical organizations will greatly benefit from the implementation of medical information technology capabilities. This thesis lays the groundwork for further research into medical technologies that can be deployed in the field with humanitarian medical teams in the near future.

TABLE OF CONTENTS

I.	INTI	RODUCTION	1
	A.	BACKGROUND	
	В.	OBJECTIVES	
	C.	RESEARCH QUESTIONS	
	D .	SCOPE	
II.	TRII	P REPORT AND LESSONS LEARNED FROM TRIP TO THAILAND),
	MAY	<i>7</i> -12, 2005	5
	A.	PURPOSE OF THE VISIT	7
	В.	LESSONS LEARNED	11
III.		KGROUND: HUMANITARIAN AND OPERATIONAL MEDICAL	
	A.	DISASTERS	
	В.	UNITED NATIONS RESPONSE TO DISASTERS	
	Δ.	1. Basic Level	
		2. Level One Medical Support	
		3. Level Two Medical Support	
	C.	U.S. MILITARY MEDICINE'S ECHELON OF CARE	
	D.	NON-GOVERNMENTAL ORGANIZATIONS AND	
		INTERNATIONAL ORGANIZATIONS (NGO)	20
	Ε.	NGOS AND MILITARY MEDICAL UNITS WORKING	
		TOGETHER	21
IV.	THE	ELECTRONIC MEDICAL RECORD	27
	A.	INTRODUCTION	27
	В.	PROBLEMS WITH PAPER MEDICAL RECORDS	28
	C.	THE MEDICAL RECORD AS A SOURCE OF INFORMATION	
	D.	ACCESSIBILITY OF THE MEDICAL RECORD	
	E.	THE MEDICAL RECORD AS A FORM OF COMMUNICATION	30
	F.	BENEFITS OF THE ELECTRONIC MEDICAL RECORD	30
	G.	DISADVANTAGES OF THE ELECTRONIC MEDICAL RECORD.	
	Н.	HEALTH LEVEL SEVEN (HL7)	
		1. Reduce Time and Effort	31
		2. How Does HL7 Achieve Interoperability?	
		3. HL7 Extensible Markup Language (XML)	
		4. Other Data Standards	
	I.	INTEROPERABILITY	33
V.	INFO	ORMATION SECURITY	35
	A.	INTRODUCTION	35
	В.	HEALTH INFORMATION PORTABILITY AND	
		ACCOUNTABILITY ACT (HIPAA)	35
		1. Electronic Transaction and Code Sets Standards	

		2. National Identifier Requirements	37
		3. Privacy	
		4. Security	
		a. Administrative	
		b. Physical	40
		c. Technical	
		5. HIPAA Applicability Outside of the United States	41
	C.	USE OF E-MAIL	
	D.	THE COST OF SECURITY	
	E.	FUNDAMENTALS OF NETWORK SECURITY (CIA)	44
		1. Virtual Private Networks and Secure Socket Layer	
	F.	SECURITY TRAINING	
VI.	TFI	EMEDICINE	51
V 1.	A.	HISTORY	
	А. В.	WHAT IS TELEMEDICINE?	
	Б. С.	BENEFITS OF TELEMEDICNE	
	D.	QUALITY OF TELEMEDICINE	
	Б. Е.	BARRIERS TO TELEMEDICINE	
	E4.	1. Licensure	
		2. Lack of Reimbursement	
		3. Medical Malpractice	
		4. General Barriers	
		5. Non-Technology Barriers	
		a. Inadequate Leadership	
		b. Lack of Physician Buy-In	
		c. Technical Support Unavailable	
		d. Interoperabilityd.	
	F.	THE DIGITAL IMAGING AND COMMUNICATIONS IN	••• 5 /
	1.	MEDICINE (DICOM) STANDARD	57
		1. Who Needs DICOM?	
	G.	SUCCESSFUL TELEMEDICINE DEPLOYMENT	
	G.	1. On-Site Site Manager	
		2. Services Offered	
		3. Kit Design	
		4. Site Selection	
		5. Identify Affected Specialties	
	Н.	IMPLEMENTATION	
	11.	1. Phased Implementation	
	I.	THE ROLE OF NURSES IN TELEMEDICINE	
VII.	_	JIPMENT	63
	A.	CASE STUDY: THE ARMY'S SOLUTION	
	В.	PURCHASING A HANDHELD PC	
	~	1. Important Factors When Choosing a Handheld	
	C.	SKYPE: P2P TELEPHONY	
		1. Firewall and NAT (Network Address Translation) Traversal	67

		2. Global Decentralized User Directory	.67
		3. Intelligent Routing	.68
		4. Security	.68
		5. Super-Simple User Interface	.68
		6. Minimum System Requirements	
	D.	STORAGE	
	E.	CONNECTION	
		1. 56kbps Modem	.70
		2. DSL	
		3. Cable Modem	.71
		4. Satellite Connection	
	F.	TRAINING	.72
VIII.	CONC	CLUSION AND FOLLOW-ON RESEARCH	.73
,	A.	CONCLUSION	
	В.	HEALTHCARE INFORMATION TECHNOLOGY IN THE FIELD	
	C.	TECHNOLOGY SUPPORT	
	D.	INTEROPERABILITY	
	E.	COMMUNICATIONS	
	F.	HIPAA AND SECURITY	
	G.	EQUIPMENT	
LIST	OF RE	FERENCES	.77
	NDIX A		
A DDE	NDIX		
AFFE	ANDIA		
APPE	ENDIX (
	DOW	NLOAD	.91
APPE	NDIX 1	D. KHAO LAK HOTELS STATUS IN MAY 20051	67
INITI	AL DIS	STRIBUTION LIST1	69

LIST OF FIGURES

Figure 1.	Simeulue Island, circled on the map	5
Figure 2.	The distance the tsunami traveled.	
Figure 3.	Khao Lak, Thailand	6
Figure 4.	Wireless Network Topology (Wat Yang Yao and Bang Muang Survivor	
_	Camp)	8
Figure 5.	Khao Lak before the tsunami	9
Figure 6.	The hotel after the tsunami	9
Figure 7.	The hotel now	9
Figure 8.	U.S. disasters from 1980 – 2004	.14
Figure 9.	Percent of office-based physicians using selected information technologies.	.28
Figure 10.	Components of HIPAA	.38
Figure 11.	Transmitting and receiving communications	.46
Figure 12.	VPN tunneling	.47
Figure 13.		.48
Figure 14.	Fly-Away Kit	.63

LIST OF TABLES

Table 1.	Public Health Impact of Selected Disasters	15
Table 2.	Basic Level Support	16
Table 3.	Level One Support.	
Table 4.	Level Two Support	
Table 5.	Level Three Support	18
Table 6.	Air Ambulance Crash Statistics	
Table 7.	Best-Selling Handhelds, by Price	66
Table 8.	Prices for the Itronix Q200	
Table 9.	Transmission Downloads Time	70

LIST OF ABBREVIATIONS

Annual Loss Expectancy **ALE** American National Standards Institute **ANSI** Annualized Rate of Occurrence **ARO** Battlefield Medical Information System - Tactical **BMIS-T** Centers for Disease Control CDC Computer Emergency Response Team **CERT** Composite Healthcare System **CHCS** College of Healthcare Information Management Executives **CHIME** Confidentiality, Integrity, and Availability CIA **Chief Information Officer** CIO Center for Information Technology Leadership CITL Center for Medicare and Medicaid Services **CMS CHD** Complex Humanitarian Disaster Complex Humanitarian Emergency CHE Communications Zone **COMMZ** Continental United Stated **CONUS** Disclosure, 2) Alteration, or 3) Destruction **DAD** Disaster Assistance Response Team **DART** U.S. Department of Health and Human Services **DHHS Digital Imaging and Communications** DICOM Department of Defense DoD U.S. Department of Justice DOJ **DSL** Digital Subscriber Line Electronic Mail E-MAIL Electronic Medical Record **EMR** European Standard **EN** Electronic Protected Health Information **EPHI** European Union EU Foreign Humanitarian Assistance **FHA** Federal Information Processing Standards **FIPS** FlyFly-Away-Kit **FLAK** Global Index GI Humanitarian Assistance HA Humanitarian Assistance and Disaster Relief HA/DR Hastily Formed Networks **HFN** Health Information Portability and Accountability Act **HIPAA** Health Level Seven HL7

Information Technology IT
Megabyte MB

Medical Evacuations MEDEVAC

magnetic resonance imaging MRI Medical Support Unit MSU National Aeronautics and Space Administration NASA Network Address Translation NAT non-governmental organizations NGO Outside Continental United Stated **OCONUS** USAID's Office of Foreign Disaster Assistance **OFDA** Peer to Peer P₂P Public Switch Telephone Network **PSTN**

Single Loss Expectancy SLE Sockets Layer SSL

Satellite Commuications

Wireless Access 802.11x

Space Technology Applied to Rural Papago Advanced Health Care
The Telemedicine and Advanced Technology Research Center
United Nations
UN
Universal Serial Bus
USB
Voice-over-IP
Virtual Private Networks
VPN

SATCOM

WIFI

Extensible Markup Language XML

ACKNOWLEDGMENTS

I would first like to thank God for all the work he has done in my life and continues to do. I have a long way to go and I promise to continue to work and improve myself in Your name.

Next, thanks to the faculty from the Naval Postgraduate School that supported this thesis with training, equipment, research, and mentorship. Brian Steckler and Jim Ehlert, I could not have asked for better advisors. Your mentorship and guidance is second to none. Thanks for everything. Glenn Cook, thank you for all of your assistance over the last two years. You assisted me greatly in getting all I could out of NPS. I am a better Medical Service Corps Officer for it. I would like to thank all the other faculty members that provided support and advice during the author's time at NPS. Thank you and keep up the good work.

Last, but most important I would like to thank my family for supporting and loving me through this experience. Marcus, you are more than I could ever wish for in a son and more than I deserve. You bring a smile to my face every time I look at you. Carolyn, I hope that I can be there for you as you have been for me during our marriage. You are a great wife and partner, you are my soul mate. I don't deserve a woman as great as you. I love you!

I. INTRODUCTION

A. BACKGROUND

The events of September 11, 2001 and December 26, 2004 truly changed the world we live in. The September 11th attacks bore witness to the worst of human kind, but the actions that followed the December 26th tsunami demonstrated some of the finer qualities of the human race. Medical expertise is not equally available throughout the world, and even in a medically advanced country like the United States, disasters can quickly overwhelm medical assets, requiring days to weeks to get care to those that need it. Developing protocols and networks to deal with such disasters is vital. Offering medical services remotely using telecommunication equipment is becoming widely accepted and is a possible solution for the above problems.

This thesis examines medical technologies that can be deployed with the Fly-Away-Kit (FLAK) created by NPS student Capt D. Lancaster to support the creation of Hastily Formed Networks (HFN) in remote areas in support of Complex Humanitarian Disasters (CHD) and Complex Humanitarian Emergencies (CHE) (see chapter seven). The initial discussion focuses on the current technologies available in conventional medical settings. Different scenarios emerge when those technologies are taken from the air-conditioned office of the Information Technology (IT) professional to the beaches of Thailand. It is the author's intention to identify those differences and discuss possible solutions to further justify the need for the FLAK in medical operations. This process will also attempt to define shortfalls in legislation, equipment and issues relating to varying climates.

A significant portion of this thesis will be devoted to the discussion of the value of electronic medical records and telemedicine technologies. As non-governmental organizations (NGO) and government organizations (GO) are forced to work with one another, clashes between these two unique cultures may be inevitable. Building an understanding between these organizations is almost as important as the service they provide. One can only hope that the events of September 11th and December 26th will never be repeated, but the lessons learned from those events and the building of cooperation between NGOs and GOs will dramatically improve communications,

organizations, and relationships for responses to future natural or man-made CHD's and CHE's. "A complex humanitarian disaster is defined the Red Cross and the Red Crescent as "a situation or event, which overwhelms local capacity, necessitating a request to national or international level for external assistance; an unforeseen and often sudden event that causes great damage, destruction and human suffering". The term Complex Humanitarian Emergencies "has come into recent use to mean a crisis in the life support and security that threatens a large civilian population with suffering and death and impose severe constraints upon those who would seek to offer help. At its core is a synergist mix of human disaster and undisciplined conflict – a mix that hamstrigs and stifles attempts to restore order and safety and then provide, in that order and safety, some semblance of solace to noncombatant men, women and children."

B. OBJECTIVES

Research for this thesis applies directly to analyzing and testing capabilities to integrate a standardized bundle of application software to support medical operations in isolated locations. The goal of this research is to create a methodology to deploy existing and future technologies to isolated areas. This thesis seeks to define criteria for deployment in cooperation with HFN and explore concepts of operations. The end product of this research will serve as a baseline for medical operations in remote locations where medical IT systems had little or no use in the past.

C. RESEARCH QUESTIONS

- 1. What technology is needed to support current HA/DR operations?
 - a. What resources and technologies do medical service providers require and which are feasible based on cost, operational, technical and other considerations?
- 2. Identify different scenarios and solutions for this concept. Can lessons learned from NPS's tsunami relief efforts in Thailand be applied globally, or are there location-specific limitations? If so, what are those factors (i.e. political, technical, logistical, economical, climatic, etc.)? What are the requirement differences in these scenarios between classes of users such as DoD, NGOs or other non-government agencies such as the United Nations?

¹ What is a Humanitarian Disaster?, http://www.alertnet.org/thefacts/reliefresources/11060515753.htm, 8/18/2005

² Medicine & Global Survival, <u>www.ippnw.org/MGS/VN1N3leaningEd.html</u>, 8/18/2005

- 3. Who is going to use and maintain the equipment and applications (civilian, military, volunteers or professionals) and the impact on operations as the different users take control? Will there be interoperability and lifecycle issues? How can interoperability problems be avoided?
- 4. Who is responsible for initial setup and deployment of materials? Make recommendations as to who is responsible.
- 5. Who will acquire communication solutions such as Satellite Communications (SATCOM)?
 - a. How long from initial request does this take to get operational?
 - b. Where will long term funding be provided?
 - c. What are the implications if funding is not obtained?
 - d. Alternate solutions (if applicable).
- 6. Security
 - a. Is Health Insurance Portability Accountability Act (HIPAA) applicable to various operations?
 - i. If so, what are some recommendations to satisfy HIPAA?
 - 1. Technical
 - 2. Administrative
 - 3. Physical

D. SCOPE

The scope of this research will include:

- A discussion of information security
- A discussion of electronic medical records
- Analysis of telemedicine
- A discussion of handheld devices
- A discussion of various connection options

II. TRIP REPORT AND LESSONS LEARNED FROM TRIP TO THAILAND, MAY 7 -12, 2005

On December 26, 2004, an earthquake ranging from 9.0 to 9.3 on the Richter scale shook the entire planet for approximately ten minutes and resulted in a massive tsunami that killed over 178,000 people in 11 countries and left another 50,000 missing and assumed dead. The earthquake originated in the Indian Ocean just above the Simeulue Island, 150km off the west coast of the province of Aceh on the island of Sumatra in Indonesia.³



Figure 1. Simeulue Island, circled on the map

The result was a tsunami with waves of 100 feet that devastated the shores of Indonesia, Sri Lanka, South India and Thailand as well as several other countries (aka Myanmar, etc, etc). Deaths were recorded as far away as South Africa which is 5,000 miles from Simeulue Island (See Figure 2).4

As stated earlier, the death counts due to the tsunami are enormous, but to make matters even worse, relief agencies in the area had begun to warn of the possibility that epidemics could break out due to poor sanitation.

³ Hope, despair 6 months after Asian tsunami. Accessed 8/11/2005 from http://www.msnbc.msn.com/id/8362436/.

⁴ Hope, despair 6 months after Asian tsunami.



Figure 2. The distance the tsunami traveled

From May 7 - 11, 2005, this author surveyed one of the affected areas, specifically Khao Lak, Thailand. Khao Lak lies in the Takua-Pa district of Phang-Nga province, in the south of Thailand. Phang-Nga is situated on the West Coast facing the Andaman Sea, and located about an hour and a half north by car of Phuket.



Figure 3. Khao Lak, Thailand

Khao Lak itself is a national park area, which had been stunning with rich natural attractions prior to the tsunami. It is also a well-located departure point to Phang-Nga's many points of interest, including the famous Similan Islands and Surin Islands in neighboring Ranong Province.

A. PURPOSE OF THE VISIT

The main purpose of the NPS visit was to repair or replace damaged gear and reestablish an Internet connection to the Bang Muang refugee camp for tsunami survivors. Time permitting, I was to interview non-governmental organizations working in the area. The trip's other purpose was to also help the author understand the concepts of operations in Thailand and witness some of the problems that still existed after five months of aid. The lessons learned in the three days in the area were priceless in the building of this thesis.

Brian Steckler (Naval Postgraduate School faculty member) joined the global response to the tsunami by "organizing and mobilizing a diverse team of U.S. Military personnel, Royal Thai Armed Forces personnel, private sector companies, and key private citizen volunteers to design, integrate, deploy, and maintain a set of two broadband wireless local area networks (WLANs) in the tsunami-devastated Andaman Sea coastal region of Thailand, including Phuket and its surrounding areas, the resort village of Khao Lak, and the town of Takuapa."⁵ These networks provided Internet connectivity to NGOs, IOs, United Nations (UN) personnel and anyone else that was in the vicinity to assist the victims of the disaster. Initially, the NPS team deployed two WLANs (802.11) to two different sites for use. The two sites, located 6 kilometers apart, were connected via an 802.16 link (equipment furnished by Redline Communications). Eventually, one of the sites acquired a broadband satellite communications link providing long-haul capabilities. The two sites mentioned above were the Grave Registration Center and the Morgue which was located at the Wat Yang Yao Buddhist Temple and the nearby Bang Muang Tsunami Survivor Camp in Takuapa. Brian Steckler was able to persuade vendors to "donate equipment and personnel to lend a hand with equipment deployment and integration. The following is a list of the equipment donated:

⁵ Brian D. Steckler, Hastily Formed Networks for Humanitarian Assistance/Disaster Relief: Naval Postgraduate School Response to the Southeast Asia Tsunami

- o Redline Communications: 802.16 WiMAX equipment manufacturer from Canada
- o Rajant Corporation: 802.11 equipment manufacturer from the USA
- o Cisco Corporation: Network router, Voice Over IP equipment manufacturer from the USA
- o ZyXEL Communications Corporation: Voice Over IP equipment manufacturer from Taiwan."

Figure 4 illustrates the network diagram of the setup in Thailand incorporating the equipment listed above.

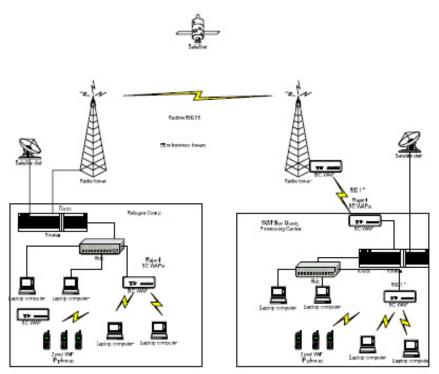


Figure 4. Wireless Network Topology (Wat Yang Yao and Bang Muang Survivor Camp)⁷

My immediate impression of the area was that it was barren. Figures 5 through 7 show how the tsunami transformed one hotel. The rest of the affected areas experienced similar results. Figure 5 depicts a Khao Lak hotel before the tsunami, a beautiful tropical paradise. Figure 7 is a good illustration of how Khao Lak looked during my visit.

⁶ Brian D. Steckler

⁷ Brian D. Steckler



Figure 5. Khao Lak before the tsunami



Figure 6. The hotel after the tsunami



Figure 7. The hotel now

Shortly after arriving in Thailand, Brian Steckler and I flew from Bangkok to Phuket where we established lodging. The intention was to make daily drives from

Phuket to Khao Lak. We stopped at a restaurant that is now famous for being the location from which a video of the waves actually hitting the beach at Khao Lak was shot during the tsunami. That tsunami video captured images of beaches full of hundreds of people on the morning of December 26. On this day in May, the beaches were completely empty. When we arrived in the main area of Khao Lak, most of the stores and dive shops were closed; only a camera shop and Internet café were open. The Internet café was charging 1 baht per minute (conversion rate at the time was 39 baht to 1 U.S. Dollar). This price became an important factor later in the trip. The Internet café received its connectivity via a commercial satellite connection. This day was scheduled to allow us to survey the area and to have a chance to see the facilities in which we would be working. This also gave Brian Steckler a chance to set things up for our work the following day. At the end of the first day, it was decided that our operations would be terminated. There were two main factors which led to the move to suspend operations in Khao Lak:

- 1. The camp staff where the refugees were located told Brian Steckler that they were not really interested in having an Internet Café in the camp and felt the room would be better used as a music room.
- 2. The local satellite company quoted a price of \$15,000 (U.S.) for a satellite connection and to cancel the connection, required 30 days notice.

After several hours of consideration, Brian Steckler decided to cease operations – remove all wireless Internet access gear that the NPS team had set up in January at the Bang Muang Survivor Camp and the Yang Yeo Bhuddist temple that was serving as the Morgue and Grave Registration Center in Takua-Pa. The following day we would go to the site and remove the equipment. Brian Steckler and I split up. I was responsible for removing our equipment from the "Dentist's Office," a dental forensics office that is responsible for using dental records to identify remains. The "Dentist's Office" site had its own dedicated satellite connection and was willing to share bandwidth with the camp. Initially, NPS had loaned a router to share the network. Now that operations had been terminated, that router needed to be returned to NPS and the "Dentist's Office" network had to be restored to its original configuration and tested. I accomplished the network reconfiguration and Brian Steckler also finished taking down the rest of the equipment. We completed our work around dusk and headed back to Phuket. Since operations were

complete and there were not many NGOs to speak with, we opted to head back to the States. We departed for Bangkok that morning and the day following I departed for the U.S.

B. LESSONS LEARNED

- Though foreign countries may have good medical systems, individuals from westernized countries may be susceptible to infections to which locals have grown immune. The hotel doctors are used to dealing with foreigners (individuals not from Thailand) instead of the local population and are able to diagnose and treat me because he is used to dealing with foreigners (individuals not from Thailand) instead of the local population. Thorough research should be done to ensure that immunizations are up-to-date and medications are prescribed to deal with common items that are prevalent in the destination country.
- Not all good intentions are well received. It is likely that an Internet café would have helped the residents and staff members of the refugee camp, but they apparently did not perceive or perhaps understand the potential benefits.
- It is obvious that the satellite company engaged in price gouging by raising the price of the satellite connection. How could the Internet Café on the main street in Khao Lak afford to only charge customers 1 baht per minute if it were paying 585,000 baht per month (\$15,000 (U.S.)) for a SATCOM Connection?
- The "Dentist's Office" computers and network needed serious technical support. I did as much as I could to get the network running, but it was obvious that many of the computers had viruses. A few of the computers crashed while I was assigning IP addresses. A local policeman came into the "Dentist's Office" to check his e-mail. One wonders how many other individuals do the same thing. The computers needed to be completely wiped clean, formatted and reinstalled. The "Dentist's Office" computers were also not grounded and I received a shock from the static electricity every time I touched a device. This will eventually take its toll on the lifespan of the devices.
- The climate wreaked havoc on the equipment. One piece of equipment had been struck by lighting and other equipment was flooded by rain (though it was supposed to be waterproof). The heat continually brought some equipment down. If long-term operations were established, an incountry technical support person would be essential to perform repairs immediately.

III. BACKGROUND: HUMANITARIAN AND OPERATIONAL MEDICAL MISSIONS

It is often in the best interests of the United States and its coalition partners to deploy U.S. forces to provide humanitarian assistance (HA).⁸ HA is a tool to not only help those that need it, but to also promote democracy. The U.S. Agency for International Development (USAID) Strategic Plan focuses activities around strategic goals relating to the National Security Strategy. These goals most prominently feature democracy and governance, regional stability and humanitarian assistance.⁹ JCS Joint Publication 3-07.6 establishes the Joint Tactics, Techniques, and Procedures (TTP's) for Foreign Humanitarian Assistance. The purpose of foreign humanitarian assistance (FHA) is to relieve or reduce the results of natural or manmade disasters or other endemic conditions such as human suffering, disease, or privation that might present a serious threat to life or loss of property.

A. DISASTERS

As stated earlier, "A complex humanitarian disaster is defined the Red Cross and the Red Crescent as "a situation or event, which overwhelms local capacity, necessitating a request to national or international level for external assistance; an unforeseen and often sudden event that causes great damage, destruction and human suffering". 10 The term Complex Humanitarian Emergencies "has come into recent use to mean a crisis in the life support and security that threatens a large civilian population with suffering and death and impose severe constraints upon those who would seek to offer help. At its core is a synergist mix of human disaster and undisciplined conflict — a mix that hamstrigs and stifles attempts to restore order and safety and then provide, in that order and safety, some semblance of solace to noncombatant men, women and children." Man-made and natural disasters are highly destructive. Examples of natural disasters include earthquakes, tsunamis, hurricanes, floods, and famine caused by drought. Man-made disasters involve terrorist attacks, military conflicts and wars and operations other than

 $^{^8}$ Joint Tactics, Techniques, and Procedures for Foreign Humanitarian Assistance. Joint Publication 3-07.6

⁹ USAID Strategic Plan, retrieved from http://www.usaid.gov/policy/budget/state_usaid_strat_plan.pdf, 8/6/2005

¹⁰ What is a Humanitarian Disaster?

war. The resulting destruction often leads to hunger, disease, lack of potable water, and poor medical care for the displaced population. 11 Figure 1 illustrates National Climatic Data Center reports that between the years of 1980 to 2004, the U.S. has experienced 62 different weather-related disasters. These events have cost over one billion dollars in damages. 12

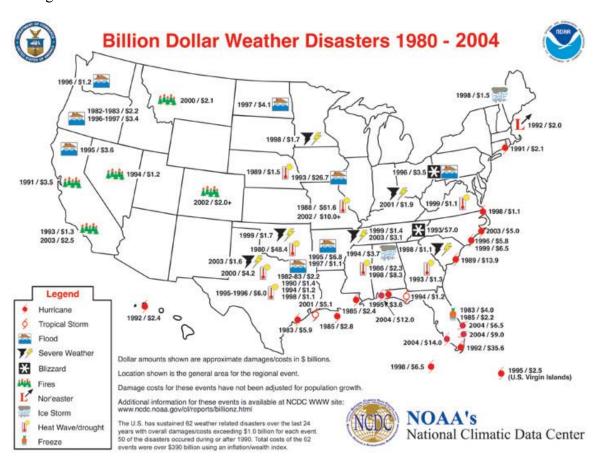


Figure 8. U.S. disasters from 1980 - 2004

In the days since the December 26, 2004 tsunami, disaster relief has become a hot topic in the media. The humanitarian response differs by the event. In Table 1, the short-term effects of disasters and the subsequent population needs are outlined. Whether these numbers are in the thousands, tens of thousands or millions will depend of the extent of the disaster and the population that it strikes.

¹¹ Andrew S. Natsios, U.S. Foreign Policy and the Four Horsemen of the Apocalypse: Humanitarian Assistance in Complex Emergencies (Westport, CT: Praeger, 1997).

¹² Billion Dollar Disasters 1980-2004, retrieved from http://www.gesource.ac.uk/hazards/billion.html, 8/6/2005.

Public Health Impact of Selected Disasters					
Effect	Complex emergencies	Earthquakes	High winds (without flooding)	Floods	Flash floods/ tsunamis
Deaths	Many	Many	Few	Few	Many
Severe injuries	Varies	Many	Moderate	Few	Few
Increased risk of communicable diseases	High	Small	Small	Varies	Small
Food scarcity	Common	Rare	Rare	Varies	Common
Major population displacements	Common (may occur in heavily damaged urban areas)	Rare	Rare	Common	Varies

Table 1. Public Health Impact of Selected Disasters
Source: Sphere Handbook

B. UNITED NATIONS RESPONSE TO DISASTERS

When a large-scale emergency strikes, the various agencies of the UN assess the situation and develop a humanitarian strategy to tackle the emergency. The United Nations and its NGO partners create an inter-agency blueprint that spells out the requirements for each appealing organization to meet their objectives in the affected regions. The UN appeals are not wish lists; they represent real and immediate needs, and usually reflect the bare minimum required.¹³ The United Nations Office for the Coordination of Humanitarian Affairs (UN OCHA) has 860 staff members and an operating budget of \$110,551,973 (2005). Ten percent (\$11,141,561) of this budget comes from the yearly UN budget and the remainder (over \$99 million) is donated by member states and donor organizations. The following will discuss in greater detail the various levels of medical aid supported by the UN.

1. Basic Level

This is in effect basic first aid and preventive medicine. There is no doctor in the area and although care may be provided by a nurse or physician assistant, most likely a trained corpsman or medic provides care using basic medical equipment and supplies. Military medics, corpsman or foreign equivalents are usually enlisted members of the

¹³ The Role of the UN and its agencies. Accessed 8/6/2005 from http://ochaonline2.un.org/businesscontributions/UNRole/tabid/297/Default.aspx#howto.

U.S. and other armed forces who provide a great degree of flexibility in operational settings because of the nature of their training and the lesser degree of regulation of their civilian counterparts. Medics and corpsmen allow physicians, physician assistants and nurses to focus on more serious casualties and triage, while providing quality care. Table 2 describes the care given at the basic level.

TREATMENT	TREATMENT	EQUIPMENT	REMARKS
CAPABILITY	CAPACITY	REQUIREMENT	
- First Aid by non-medical personnel or medic/corpsman - Core skills: 1. Cardiopulmonary resuscitation 2. Hemorrhage control 3. Fracture immobilization 4. Wound dressing (including burns) 5. Casualty transport and evacuation 6. Communications and reporting		- First Aid Kit - Personal field dressing - Pocket mask (optional)	-Troop-contributing country to prepare peacekeeper with the required medical skills -Peacekeeper to be trained in accordance with standards stipulated by MSU

Table 2. Basic Level Support.

Source: Medical Support Manual for UN Peacekeeping Operations

2. Level One Medical Support

This is the first level where a doctor is on site. It provides first-line care, emergency resuscitation, stabilization and evacuation of casualties to a higher level of care. A Level One medical unit is to have adequate medical supplies and consumables for 500 troops for up to 60 days. Care that can be given at Level One is described in Table 3.

3. Level Two Medical Support

This is the first level where surgical expertise and facilities are available. The mission of a Level Two medical facility is to provide second-line health care, emergency resuscitation and stabilization, limb- and life-saving surgical interventions, basic dental care and casualty evacuation to the next echelon of care. Level Two care is described in Table 4.

TREATMENT	TREATMENT	MANPOWER	EQUIPMENT	INFRA-
CAPABILITY	CAPACITY	REQUIREMENT	REQUIREMENT	STRUCTURE
1. Tx of common illnesses 2. Adv life support - airway - ventilation - hemorrhage control - treatment of shock and dehydration 3. Trauma management - fracture immobilization - wound & burns management - infection control-analgesia 4. Minor surgery 5. Casualty evacuation 6. Preventive medicine	- Treatment of 20 ambulatory patients per day - Holding capacity of 5 patients for up to 2 days - Medical supplies & consumables for up to 60 days	2 x Medical Officer 6 x Paramedic/Nurse 3 x Support Staff NB: Capability of splitting into 2 x FMTs, each with 1 doctor and 2-3 paramedics	- Resuscitation and life support equipment, fluids and drugs - Tentages or containers - Building - General support - Field dispensary - Clinic and ward equipment set - Surgical sets - Splints, bandages and stretchers - Portable doctor bags kits - Basic lab kit - Sterilization equipment & refrigerator - 1-2 x Ambulance	- Tentages or containers - Building (if available) - Basic general support and office facilities

Table 3. Level One Support.

Source: Medical Support Manual for UN Peacekeeping Operations

			1 6 1	
TREATMENT CAPABILITY	TREATMENT CAPACITY	MANPOWER REQUIREMENT	EQUIPMENT REQUIREMENT	INFRA- STRUCTURE
Treatment of common medical conditions Triage Advanced life	- Up to 40 outpatient visits per day - 3 to 4 major surgeries per day	2 x Surgeons (general & orthopedic) 1 x Anesthetist 1 x Internist	- Clinic and ward equipment - Resuscitation room equipment - Standard	Hospital Reception / Admin Resuscitation room Outpatient
support and intensive care 4. Life and limb-saving surgery under anesthesia 5. Pharmacy 6. Basic dental care 7. Basic laboratory facility - Blood group & cross matching - Hematology - Gram staining - Blood film - Urinanalysis 8. Basic diagnostic radiography 9. Hygiene control and preventive medicine 10. Casualty	- 10 to 20 in- patients for up to 7 days each - 5 to 10 dental treatments per day - 10 x-rays and 20 laboratory tests per day - Medical supplies and consumables for 60 days	1 x General Physician 1 x Dentist 1 x Hygiene Officer 1 x Pharmacist 1 x Head Nurse 2 x Intensive care nurses 1 x OT Assistant 10 x Nurses/Paramedic 1 x Radiographer 1 x Laboratory technician 1 x Dental Assistant 2 x Drivers 8 x Support staff Total: 35	operating room fixtures and equipment - Intensive care equipment - Field laboratory and radiography facility - Dental chair and equipment - Hospital support equipment, e.g. autoclave, fridge - 2 x Ambulance	consultation rooms - 1-2 wards - 1-2 bed ICU - Operating room - Pharmacy - X-ray section - Laboratory section - Dental section - Sterilization area 2. Support Services - Kitchen - Laundry - Storage facility - Maintenance facility - Communications - Generator - Office - Sanitation &waste
evacuation to Level 3 or 4				disposal - Accommodation & messing

Table 4. Level Two Support

Source: Medical Support Manual for UN Peacekeeping Operations

TREATMENT	TREATMENT	MANPOWER	EQUIPMENT	INFRA-
CAPABILITY	CAPACITY	REQUIREMENT	REQUIREMENT	STRUCTURE
All capabilities of Level Two facility. In addition: 1. Specialist consultation services 2. Multi-discipline surgical services 3. Post-operative & intensive care 4. Full laboratory services 5. Diagnostic radiology, ideally with ultrasound & CT-scan 6. Pharmacy 7. Dental surgery and x-ray	- Up to 60 outpatient visits per day - Up to 10 major surgeries per day - Up to 50 inpatients for up to 30 days each - 10-20 dental treatments per day - 20 x-rays and 40 laboratory tests per day - Medical supplies and consumables for 60 days	16 x Doctors - General surgeons - Orthopedic surgeon - Anesthetists - Internists - General physician - Dermatologist - Psychiatrist - Other specialists 1 x Dental Surgeon 1 x Dental Surgeon 1 x Dental Surgeon 1 x Hygiene Officer 1 x Pharmacist 1 x Pharmacist 1 x Pharmacist - Head nurses - ICU nurses - OR Assistants - Nurses - Paramedics 2 x Radiographer 2 x Lab technician 14 x Support staff Total: 90	As for Level Two facility. In addition: - OR fixtures and equipment for general surgery & orthopedics - Intensive and high-dependency care equipment - Laboratory and radiography equipment - Dental chairs and x-ray - Ambulances - General transport	1. Hospital - Reception/ Admin - Resuscitation room - 4 x Outpatient consultation room - 2-4 x Ward - 4-bed ICU - 2 x Operating room - Pharmacy - X-ray unit - Laboratory unit - Dental surgery (2 chair) - Dental x-ray room - Sterilization room 2. Support Services - Kitchen - Laundry - Storage facility - Maintenance facility - Communications - Generators - Fuel store - Water purification - Sanitation and waste disposal - Accommodation & messing

Table 5. Level Three Support

Source: Medical Support Manual for UN Peacekeeping Operations

C. U.S. MILITARY MEDICINE'S ECHELON OF CARE

U.S. Military medicine's role during wartime is to support the line commander by conserving fighting strength so that he/she may accomplish the military mission. These objectives are the same when treating casualties in a disaster driven humanitarian mission (CHD). The U.S. Military Medicine's objectives are to:

- Save lives
- Get casualties off the battlefield and into treatment facilities
- Provide modern treatment
- Get service members back to duty as quickly as feasible or evacuate out of the area to a higher echelon of care.
- Make available the largest amount of benefit to the greatest quantity of human resources

To meet these requirements, support in the field is structured into echelons of care:

• **Echelon I.** Echelon I is the first medical care a soldier receives – it is unit-level health care that includes treatment and evacuation from the point of injury or illness to the unit's aid station. This echelon includes immediate

lifesaving measures, combat stress support, casualty collection, and evacuation to supporting medical treatment.

- **Echelon II.** Echelon II is division-level health service support, which includes evacuating patients from the unit-level aid stations and providing initial resuscitative treatment in division-level medical facilities. This echelon includes medical companies, support battalions, medical battalions, and forward surgical teams, as well as intratheater patient evacuation assets.
- Echelon III. Echelon III is corps-level health service support, which includes evacuating patients from supported divisional and non-divisional units and providing resuscitative and hospital care. In addition, Echelon III includes providing area health service support within the corps' area to units without organic medical units. Echelon III care is provided by units such as mobile army surgical hospitals (MASH)/Naval Fleet Hospital. Patients unable to survive movement over long distances receive surgical care in an Echelon III hospital.
- **Echelon IV**. Echelon IV is communications zone-level health service support, which includes the receipt of patients evacuated from the corps. This echelon involves treating the casualty in a general hospital and other communications zone (COMMZ)-level facilities. Here, patients receive further treatment to stabilize them for their evacuation to CONUS.
- Echelon V. Echelon V is the most definitive care provided to all categories of patients in CONUS and OCONUS military medical facility. Echelon V is the CONUS-sustaining base and is where the ultimate treatment capability for patients from the theater resides, including full rehabilitative care and tertiary-level care.¹⁴

Since the early 1990's the U.S. military has participated in several humanitarian missions (i.e., Somalia, Bosnia, Kosovo, Cambodia, Haiti, Kuwait, etc). Humanitarian missions rely heavily on the ability to deliver primary medical care to those affected. The military has qualified physicians, nurse practitioners, physician assistants and medics/corpsmen that are ready to deploy on a moment's notice. Though the military is usually one of the first to arrive at the scene of the disaster, military medical units arrive after the emergency phase of the disaster has passed. At this point, there is a substantial need for preventive medicine and primary care. Because of their operational missions and capabilities, the U.S. Armed Forces have the ability to hastily deploy personnel, supplies and equipment to anywhere in the world and can perform adroitly where there is

¹⁴ Traditional Army Medical Wartime Structure. Accessed 8/6/2005 from http://www.rand.org/publications/MR/MR773/MR773.chap2.html.

no existing transportation infrastructure. The organizational structure of the U.S. military allows for satisfactory care far beyond what many foreign or civilian counterparts can offer.

D. NON-GOVERNMENTAL ORGANIZATIONS AND INTERNATIONAL ORGANIZATIONS (NGO)

The term non-governmental organization, or NGO, was not in use prior to the formation of the United Nations (UN). The first mention of NGO was in UN Article 71, which stated "non-governmental organizations" could have "suitable arrangements for consultation." Thus, "NGO" became part of UN terminology.

Today many types of organizations are described as NGOs. There is no generally accepted definition of an NGO and the term carries different connotations in different circumstances. Still, most NGOs share certain basic characteristics:

- NGOs must be independent from the direct control of any government
- NGOs will not be constituted as a political party
- NGOs must be a non-profit organization
- NGOs can not be a criminal group
- NGOs must be non-violent

Some of these boundaries are occasionally blurred. Some NGOs are affiliated with a political party or religious group, and various NGOs produce income from revenue generating activities, particularly from the sales of publications, and a small number of NGOs may be allied with violent political protests. Also, individuals and organizations that financially support these organizations put political pressure on them, thus lessening their impartiality. A large portion of financial support comes from governments of wealthy countries that endow the organizations with a large percentage of the NGOs's budget. Many NGOs are accountable to their donor constituency and headquarters personnel, who establish the NGO's priorities and fund the programs the NGO undertakes in cooperation with the host country's government.

One of the common questions about NGOs is whether they are free of government influence. In the past, some governments have tried to influence certain NGOs or the community as a whole. As it applies to humanitarian aid in hostile territories, a perception of such activity could be damaging for the government or NGO.

NGOs increasingly work in disaster areas providing humanitarian relief and medical assistance in countries around the world. Similar to their military counterparts, they face many serious challenges. But even more than their military counterparts, they must contend with government or rebel groups denying them access to those in need, corrupt officials or warlords demanding payoffs or skimming off the top of relief funds, and/or local aggression threatening the well-being and even the lives of their personnel.

USAID's Office of Foreign Disaster Assistance (OFDA) works directly with the host nation government and in concert with UN organizations and NGOs. If warranted, OFDA deploys its Disaster Assistance Response Team (DART), disaster assistance specialists who evaluate the state of affairs and advise the NGOs. NGOs working in a complex emergency may be funded entirely or to some extent by the DART, with the responsibility and accountability that accompanies monetary support. Humanitarian organizations must consider the effects of economic support from a government or other source along with the desire to maintain their autonomy and neutrality. For this reason, some humanitarian organizations do not accept any government subsidy.

E. NGOS AND MILITARY MEDICAL UNITS WORKING TOGETHER

A perceived problem for NGOs is that military forces increasingly dispense humanitarian assistance, blurring the line between military and humanitarian support and making civilian humanitarian workers potential targets for terrorist groups. In an effort to reduce this view, continue their autonomy and ensure the principles of humanity, impartiality, and neutrality, many NGOs try to avoid contact with, and may act in a hostile manner toward, military personnel that they come in contact with.

If NGOs and military units are to increase cooperation as it relates to humanitarian missions, they must begin to understand one another. The NGO will more easily understand the military culture than the military will understand the NGO culture. This is due primarily to the steadiness and predictability of military culture, whereas the NGO culture constantly changes to adapt to the mission. Even though the military culture has seen its share of changes, their culture (ranks, goal orientated, etc) remains the same With that said, it is as important for the armed forces to understand the NGOs as it is useful for the NGOs to understand the considerable assets at the disposal of the military that may be beneficial to the NGO And vice versa. <<and vice versa?>>

When the military is involved in disaster relief activities, military resources are provided mainly to enhance or accompany the relief efforts of the affected country's civil authorities or of the humanitarian relief community. This support may include providing logistics, transportation, airfield management, communications, medical support, distribution of relief commodities, or security. The synergistic environment created by the U.S. military and NGOs can be dynamic. Equipped with greater mutual assets, these organizations can respond to the demand of increasingly numerous and overwhelming complex emergencies around the world. Essential to this synergy is the need for improved appreciation of the cultural climate of each entity.

The March 2003 UN guidelines on the Use of Military and Civilian Defense Assets to Support UN Humanitarian Activities in Complex Emergencies defines humanitarian assistance as "aid to an affected population that seeks, as its primary purpose, to save lives and alleviate suffering of a crisis-affected population. Humanitarian assistance must be provided in accordance with the basic humanitarian principles of humanity, impartiality, and neutrality."15 Although NGOs vary in organization, funding constituencies, and methods of operation, they generally adhere to the Code of Conduct of the International Committee of the Red Cross and Red Crescent Movement and NGOs in Disaster Assistance, adopted in 2001. This code stipulates:

- The humanitarian imperative comes first. The prime motivation of our response to disaster is to alleviate human suffering.
- Aid is given regardless of the race, creed, or nationality of the recipients and without adverse distinction of any kind. Aid priorities are calculated solely on the basis of need.
- Aid will not be used to further a particular political or religious standpoint.
- NGOs shall endeavor not to act as instruments of government foreign policy. In order to protect our independence, NGOs will seek to avoid dependence upon a single funding source.
- NGOs shall respect culture and custom.
- NGOs shall attempt to build disaster response on local capacities. Where possible, NGOs will strengthen these capacities by employing local staff, purchasing local materials, and trading with local companies.

¹⁵ Guidelines on the Use of Military and Civilian Defense Assets to Support UN Humanitarian Activities in Complex Emergencies, United Nations, March 2003.

- Ways shall be found to involve program beneficiaries in the management of assistance aid. Effective assistance and lasting rehabilitation can best be achieved where the intended beneficiaries are involved in the design, management, and implementation of the assistance program.
- Assistance aid must strive to reduce future vulnerabilities to disaster as well as meeting basic needs.
- NGOs hold themselves accountable to both those they seek to assist and those from whom they accept resources.
- In our information, publicity, and advertising activities, we shall recognize disaster victims as dignified humans, not hopeless objects." 16

A great asset to the military is the fact that in some cases the NGO personnel have been in country for years, they speak local languages, understand cultural and religious practices, and most of all have earned the people's trust. NGO personnel have assisted in the establishment or strengthening of existing agricultural, education, health, and industrial sectors. When a complex emergency arises, the NGOs usually have some personnel already in country and are able to focus their attention on areas that require aid. An important aspect of the NGO is that they also employ national personnel that are citizens of the country and will remain there even when the NGO and the military have to evacuate. The local population also understands that the NGOs will continue working in the country after the emergency is over and when military units have departed.

The military's primary responsibility is to create and sustain a secure and steady atmosphere, the existence of which is beneficial to the NGO. Once this atmosphere is established, civilian humanitarian personnel can give aid to the affected people. The roles of civilian and military personnel are completely interdependent. However, there remains a perception that NGOs are not completely willing to enter into a coalition with military forces. In this paper, created in collaboration with a variety of international humanitarian NGOs, in addition to and in the framework of the above-mentioned principles, the use of military and civil defense assets (MCDA) shall be guided by the six following standards:

¹⁶ Code of Conduct for the International Red Cross and Red Crescent Movement and NGO/IOs in Disaster Assistance. Accessed 8/6/2005 from http://www.icrc.org/web/eng/siteeng0.nsf/iwpList74/56A4E71E11C9189CC1256B6600596BA6#a3.

- Requests for military assets must be made by the Humanitarian/Resident Coordinator on the ground, not political authorities, and based solely on humanitarian criteria.
- MCDA should be employed by humanitarian agencies as a last resort, i.e., only in the absence of any other available civilian alternative to support urgent humanitarian needs in the time required.
- A humanitarian operation using military assets must retain its civilian nature and character. While military assets will remain under military control, the operation as a whole must remain under the overall authority and control of the responsible humanitarian organization. This does not infer any civilian command and control status over military assets.
- Humanitarian work should be performed by humanitarian organizations. Insofar as military organizations have a role to play in supporting humanitarian work, it should, to the extent possible, not encompass direct assistance, in order to retain a clear distinction between the normal functions and roles of humanitarian and military stakeholders.
- Any use of MCDA should be, at its onset, clearly limited in time and scale and present an exit strategy element that defines clearly how the function it undertakes could, in the future, be undertaken by civilian personnel.
- Countries providing military personnel to support humanitarian operations should ensure that they respect the UN Codes of Conduct and the humanitarian principles."17

It is important to remember the different roles that these organizations play during a humanitarian disaster. The U.S. military is an extension of the U.S. government's foreign policy. While the NGOs may want to coordinate with the military, they must be very careful they are not perceived as an apparatus of any government. The NGO must maintain the perception that they are in country only to support humanity, impartiality, and neutrality. Adherence to these central ideas is of vital importance to the humanitarian workers on the ground. Although the roles of the humanitarian community and the military must remain distinct, as the response to complex disasters and emergencies increases, the necessity for effective collaboration between the two groups will grow.

¹⁷ Guidelines on the Use of Military and Civil Defence Assets to Support United Nations Humanitarian Activities in Complex Emergencies, March 2003.

Although there are many differences in the philosophies of these organizations (NGOs and U.S. Military they are inclined to share three main characteristics: first and foremost, both organizations count human security issues as their top priority; both the U.S. military and the NGOs are highly flexible; and, finally, these two organizations are equally innovative. Host nation, international, bilateral government, NGOs civilian organizations and military forces are essential partners in restoring and maintaining peace following a complex emergency. Until these organizations can work together to facilitate civilians' ability to run their country in a peaceful and reasonably effective manner, the military must remain as peacekeepers or occupation forces. Effective civil-military interdependence is the military's ticket home from Bosnia, Kosovo, Afghanistan, Iraq, and other complex emergencies yet to come.

THIS PAGE INTENTIONALLY LEFT BLANK

IV. THE ELECTRONIC MEDICAL RECORD

A. INTRODUCTION

The use of technology in health care has greatly increased our life expectancy, but unfortunately the medical community has not been eager to use technology to improve their business operations. The CDC's ambulatory medical care surveys, conducted from 2001 to 2003, report that only 31% of hospital emergency departments, 29% of primary care offices, and 17% of small doctors' offices have integrated an EMR into their practice. Most medical offices depend greatly on a paper medical record for lab results, x-ray reading, medical history, etc. In a twenty-minute doctor's visit, the physician not only has to examine the patient and chart the visit, he/she must also enter diagnosis and treatment codes and review past visits for chronic problems.¹⁸

Many healthcare facilities do employ information management systems (IMS) for financial and some patient care operations, but the systems rarely are networked together and information is not shared. In 2003, the most frequent IT application used in physicians' offices was an electronic billing system and nearly three-fourths (73 percent) of physicians submitted claims electronically.¹⁹ Other hospitals have created their own IMS, but they are not designed to cooperate with other stovepipe systems. This problem can exist even at the departmental level within the hospital itself, the result being that the departments or hospitals cannot communicate with one another. All of the different records find their way to the patient's main record eventually, but not without the concern of loss of documentation and privacy. Many of the statistics above are not really applicable to the support of a humanitarian disaster, but demonstrate the unwillingness or reluctance of the medical community to invest in information technology.

An electronic medical record (EMR) can help a facility realize significant improvements in patient care in both the traditional healthcare setting and in the most

¹⁸ National Center for Health Statistics, "New Study Shows Limited Use of Electronic Medical Records." Press release, March 15, 2005. Retrieved from http://www.cdc.gov/nchs/pressroom/2005news/medicalrecords.htm, 8/2/2005.

¹⁹ National Center for Health Statistics, Use of Computerized Clinical Support Systems in Medical Settings: United States, 2001–03. Advance Data Number 353, March 15, 2005. (PHS) 2005-1250. Retrieved from http://www.cdc.gov/nchs/data/ad/ad353.pdf, 8/2/2005.

remote areas of the World. These EMRs have the capability to capture, categorize, and present pertinent clinical information in a manner that far exceeds the capability of a paper record. Additionally, an EMR allows multiple caregivers simultaneous access that will be priceless in the field.

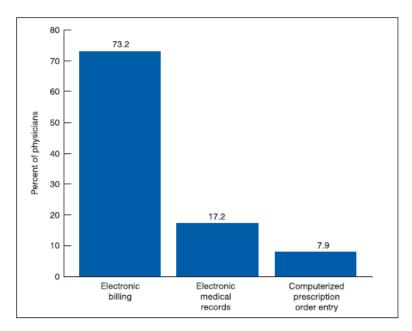


Figure 9. Percent of office-based physicians using selected information technologies

B. PROBLEMS WITH PAPER MEDICAL RECORDS

Paper records cannot become outdated and provide indisputable evidence of care, and have been used in modern medicine for decades. So why now is the paper medical record a detriment to medicine? First-rate medical care for a patient requires a precise and structured record of the patient's medical history. A physician trying to care for the injured after a natural disaster not only has to document the treatment of injuries, but must also take down demographic data and location of the patient for follow-up care; then the doctor must carry each record with him/her and at the end of the day calculate common injuries or disease. An EMR allows the providers to perform queries on the patient's records or on a select population. This would greatly assist in the identification of sanitation problems discussed in the trip report. Up until now, all paperwork was ultimately stored in the paper medical record. Therefore, the paper medical record represented the only complete source of a patient's medical history. Additionally, the

medical records of patients that had been maintained at a facility for many years consist of many large volumes. For the doctor to get a complete picture of the patient's status, he/she would have to review all of those volumes. Furthermore, since so many staff members handle the patient record, it was not uncommon for important information to be misfiled in the record or in the wrong record. Finally, how is a medical humanitarian team going to safeguard medical records in the field and as the population of patients grow, maintenance of the medical records may become a real challenge.

C. THE MEDICAL RECORD AS A SOURCE OF INFORMATION

The classic paper medical record contains multiple sections of treatment and results and a great deal of the documentation concerning treatment is handwritten in the record by the medical staff. Administrative paperwork (i.e. consent forms, transfusion records, patient instructions, etc) is also stored in the record.

In the traditional healthcare setting, an appointment scheduling is usually performed by a receptionist or entry-level staff members. Each clinic has their own appointment system, thus making it difficult for patients to get appointments during the same visit. Departments create other sets of paperwork that are possibly stored in the patient's record. Patient medical records are usually stored in a vault and behind a locked door, and only staff members are allowed to access if the patient came to the hospital for an outpatient or inpatient visit.

In the operational setting, this function could be used to schedule different villages or towns and collect demographic data about each patient in those areas. Patient records will need to be mobile if the area is geographically spread out or if there are no permanent facilities available for the medical team.

D. ACCESSIBILITY OF THE MEDICAL RECORD

Every day, physicians, nurses, medical residents, health information management personnel, data managers, and hospital unit coordinators need access to the information in a patient's record. Usually, charts are pulled the evening before for patient visits and returned at the end of the next day. If business operations need that record, they have to wait until it is returned. If the clinic needs the record, but business operations have it, then it could be unavailable for the patient's visit. It is very important that the medical record follows the patient throughout their visit. The medical record tells a story as it

develops; if the story is incomplete, the diagnosis or treatment could be wrong and eventually it could cost the patient his/her life. A disaster like a tsunami or a terrorist attack will also require medical providers to access records simultaneously. It can assist medical providers to identify biological, chemical and nuclear symptoms if weapons of mass destruction have been used. The EMR will also be helpful if there is a disease outbreak in an area that has been affected by a natural disaster which will allow for the quarantine of that area, etc.

E. THE MEDICAL RECORD AS A FORM OF COMMUNICATION

Doctors communicate about patients through their notes in the medical record. An attending physician can use the chart to review the previous attending physician's notes in order to catch up on the patient's status. Specialty providers (i.e. general surgeons, cardiologists, otolaryngologists, etc.) can give the attending physician the results in the medical record. Nurses on the ward or in an operational setting can review their patients' charts at the beginning of their shift to see if there have been any changes since their last shift. It is obvious that the medical staff relies heavily on the medical record.

F. BENEFITS OF THE ELECTRONIC MEDICAL RECORD

One of the benefits of an EMR is that information is more accessible. The entire patient's information is a part of the EMR and can be viewed at any computer terminal in the hospital by employees with the proper security clearance. Data mining is increasingly more accurate and efficient due to automation. Eventually, EMRs will not only distribute the correct information, but will also dynamically assist in the treatment of patients through the use of that information. The communication between the providers will also be greatly improved due to the fact that the healthcare providers will be viewing the same information.

G. DISADVANTAGES OF THE ELECTRONIC MEDICAL RECORD

An EMR is no different than any other networked system. A stand-alone system or a paper record in a vault, behind a locked door with an alarm, is always easier to protect. The would-be thief must physically attack the facility. The chances of getting caught are much greater and loopholes in international law cannot be used. A cyber attack has the benefit of anonymity, and there is even a good chance that the theft could

go undetected. Also, in any electronic system there is a greater chance of data corruption. Due to the amount of people that can simultaneously access the data, careful controls must be put into place to combat this problem.

Additionally, when deploying an EMR to the field there is always going to be concern of its ability to survive in the climate of the area where the team is going to deploy. High moisture areas can cause rusting and dry climates can cause static electricity. Areas in the desert have sand storms and tropical areas have rain storms and very high humidity. Unfortunately, there are not many ideal areas in which to deploy information technology. Though EMRs are lighter and much more portable than a paper based record, the paper record does not require power and can be dried out and still may be of value if it is submerged in water. Finally, if the EMR that is chosen to integrate is not interoperable with business partners or affiliated clinics, the system will have little to no benefit. Health Level Seven (HL7) is an example of a widely accepted standard to ensure interoperability.

H. HEALTH LEVEL SEVEN (HL7)

Health Level Seven is an American National Standards Institute (ANSI) accredited standard. The HL7 standard is widely accepted and employed not only in the U.S. but throughout the world with affiliate groups in Australia, Canada, Finland, Germany, India, The Netherlands, New Zealand, South Africa and the United Kingdom. HL7 is recognized as the most widely used standard among healthcare providers in a 1998 survey of 153 CIOs sponsored by the College of Healthcare Information Management Executives (CHIME). The employment of HL7 has cut costs and facilitated interconnectivity.

1. Reduce Time and Effort

Since HL7's publication and extensive implementation in 1990, the application of the standard has cut interface costs by specifying the importance of events that trigger information flows between systems. Custom-built interfaces prior to the introduction of the HL7 standard cost between \$50,000 and \$250,000. Today, an HL7 interface with similar functionality costs between \$2,000 and \$10,000.20

²⁰ Health Level Seven, Inc., "What is HL7?" Retrieved from http://www.hl7.org/, 8/3/2005.

2. How Does HL7 Achieve Interoperability?

It is the author's belief that the HL7 standard is determined to accomplish:

- o Implementation of interoperable EMR systems to exchange patient information needed to deliver superior care as patients move from one setting to another.
- O Standards that can be restructured incrementally to lessen both amendments and expenses as EMRs advance to meet shifting functional requirements.
- O It is also important that the medical community choose one standard, due to the fact that if various standards exist, vendors will be required to support all of them, thereby increasing costs.²¹

3. HL7 Extensible Markup Language (XML)

HL7 version 3.0 will expand the capabilities of medical information exchange. One of the new aspects in this next version is the evolution of information encoding. HL7 that adds an encoding definition for an application layer protocol for information by using extensible markup language (XML) to explain the grammar or syntax of the language of healthcare and define it with information tags.

4. Other Data Standards

In the computer industry standards for hardware and software have been created so that components of different vendors and systems are compatible. The following is a sample of the major health care standards utilized in telemedicine:

- HL7 Standard for sharing clinical data, written by Health Level Seven committee.
- E1381/1394 Standard for exchanging lab data among computers and instruments, written by ASTM E31.14 subcommittee.
- P1073 -Medical Interface Bus standard, written by IEEE P1073 committee.
- E1460 Standard for sharing Modular Health Knowledge Bases, written by ASTM E31.15 subcommittee.
- DICOM Image exchange standard, written by American College of Radiology and National Electrical Manufacturer's Association.
- E1467 Standard for exchanging neurophysiologic data, written by ASTM E31.16 subcommittee.

²¹ Interoperability. Retreived from http://www.himssehrva.org/docs/EHRVAExpandedPositionStatementfinal042905.pdf, 8/3/2005.

- NCPDP Pharmaceutical information exchange standard, written by the National Council of Prescription Drug Pharmacies.
- X12N Insurance data exchange standard, written by Insurance Subcommittee of Accredited Standards Committee X12.²²

I. INTEROPERABILITY

Deployments of the HL7 or similar standard will ensure the maximum benefit of EMRs and information systems. The Center for Information Technology Leadership (CITL) reinforced this statement in its 2004 report, "The Value of Healthcare Information Exchange and Interoperability." CITL estimates that the nationwide implementation of technology that provides for interoperability and facilitates the exchange of healthcare information between healthcare providers could result in net savings of \$77.8 billion annually. The objective of interoperability in the healthcare setting is to support the electronic exchange of patient summary information among caregivers and other authorized parties via dissimilar EMRs and other patient care systems to improve the value, well-being, effectiveness, and usefulness of patient care.

When choosing an EMR for a humanitarian mission, the user must be careful not only to choose a product for its ease of use or its functionality as it relates to patient care, but also to choose a system that supports a standard that will facilitate a synergistic environment with all of its partners.

²² Sherryl Fisk, Telemedicine lecture notes, University of Illinois, Springfield, November 1997. Retrieved from http://www.quasar.org/21698/textfodder/Telemedicine.html, 8/3/2005.

²³ Center for Information Technology Leadership, "Healthcare Information Exchange and Interoperability (HIEI)." Retrieved from www.citl.org/research/HIEI.htm, 8/3/2005.

THIS PAGE INTENTIONALLY LEFT BLANK

V. INFORMATION SECURITY

A. INTRODUCTION

Computer and information systems will eventually become an integral part of the healthcare system, used to improve and advance all aspects of patient care. The field of medicine has been slow to adopt such technologies. Health care lags behind the information age, a new study found that fewer than a third of hospitals and only 17 percent of doctors' offices check electronic records prior to treating patients or prescribing medicine and only 8 percent of physicians use a computerized physician order entry system.²⁴ With that said, the sector has seen some growth during the past decade due in large part to the explosion of the Internet and the acceptance of computers by patients and healthcare employees. As humanitarian organization deploy medical suites, it will be vital to secure that information or the aid workers will not use the technology.

B. HEALTH INFORMATION PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

The Health Information Portability and Accountability Act of 1996 (HIPAA) (Public Law 104-91) is a U.S. law designed to protect patients' information. The objective of HIPAA is to ensure that healthcare providers secure patients electronic records in the same way that hardcopy records are secured, allowing a healthcare entity to enhance their level of services. Improved security will lead to better implementation of electronic transactions.

HIPAA's primary goal is to restore the patient's confidence that the medical community is able to properly handle (read, file, document, etc.) sensitive medical data. According to the American Medical Informatics Association, "In light of 'modern medical practice' and the growth of third-party insurers, individuals no longer possess a reasonable expectation that their histories will remain completely confidential."²⁵ In a

²⁴ Robert Roy Britt, Hospitals and Doctors Lag Behind Information Age, http://www.livescience.com/humanbiology/20050315 medical info.html, 8/6/2005

²⁵ Lichtblau, E. (2004, February 11 & 12). Ashcroft defends subpoenas. New York Times.

1993 survey, 80% of respondents believed that consumers had lost control over information about themselves.²⁶

HIPAA is regulated by the U.S. Department of Health and Human Services (DHHS) and has vast ramifications for healthcare providers and their affiliate organizations that fail to comply. This applies to every health care institution in the United States (civilian, federal, state, etc). "HIPAA establishes two categories of penalties for entities that misuse personal health information:

- (1) Civil penalties. Health plans, providers, and clearinghouses that violate standards will be subject to civil liability of \$100 per incident, up to \$25,000 per person, per year, per standard.
- (2) Federal criminal penalties. Health plans, providers, and clearinghouses that knowingly and improperly disclose or obtain information will be subject to criminal liability. This will be up to \$50,000 and one year in prison for disclosing or obtaining protected health information; up to \$100,000 and five years in prison for obtaining protected health information under false pretenses; and up to \$250,000 and 10 years in prison for disclosing or obtaining protected health information with the intent to use it for commercial advantage, personal gain, or malicious harm."²⁷

The HIPAA Privacy compliance deadline was April 14, 2003 and the HIPAA Security compliance deadline was April 21, 2005, although small health plans have until April 21, 2006 to comply.

One key motivation in the creation of HIPAA was the desire of the Center for Medicare and Medicaid Services (CMS) to have all Medicare transactions occur electronically. Before this can take place, the security and privacy of patient records must be assured. However, this was not the only factor driving the enactment of HIPAA due to the increasing use of the Internet and electronic transactions as they related to healthcare. HIPAA's Privacy section protects consumers from the exploitation of their personal health information.

²⁶ Barrows, R. (1996). Privacy, confidentiality, and electronic medical records. Journal of American Medical Informatics Association, 3(2), 139-148.

²⁷ DHHS. Protecting the privacy of patients' health information: Summary of the final regulation. http://aspe.hhs.gov/admnsimp/final/pvcfact1.htm, 8/6/2005

The law applies directly to three specific groups commonly referred to as covered entities (CE). These three groups include:

- Health Care Providers who transmit any health information in electronic form in connection with a transaction for which standards requirements have been adopted.
- Health Plans
- Health Care Clearinghouses

There are four parts to HIPAA:

1. Electronic Transaction and Code Sets Standards

The HIPAA Transactions and Code Set Standards standardize the format for electronic transactions between physicians and health plans and other entities. The compliance date for the Transaction and Code Set Standards was October 16, 2003.

2. National Identifier Requirements

National Provider Identifiers (NPIs) are numeric identifiers required for use by all health care providers under HIPAA's Administrative Simplification regulations. NPIs further the goal of standardizing health care transactions between physicians, various payers and clearinghouses. NPIs use will be mandatory on all electronic transactions after May 23, 2007.

3. Privacy

Until the HIPAA privacy rule was established there was no set standard for accessing and handling all protected health information (PHI) in both electronic and paper formats. The manner in which medical information was handled varied greatly and the patient's right to privacy regarding health information was wide-ranging, depending on different state laws. With HIPAA, health care providers, health plans and other health care services that practice in the United States have to abide by the minimum standards. A state can always adopt a law stricter than HIPAA to further secure patients' privacy, but it cannot detract from the basic protection specified in HIPAA. The privacy rule became effective April 14, 2001.

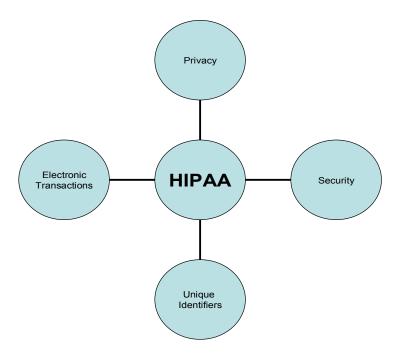


Figure 10. Components of HIPAA

A patient always has access to their medical record. Before HIPAA this was not guaranteed. At the time, only 25 states had laws requiring patients to be able to view and request copies of their medical records. In addition to viewing and copying, HIPAA allows patients with a process to amend their medical records if they feel there is an error.

Every patient that has visited a doctor's office in the past year has been asked to read and sign a notice of privacy practices in relation to how the patient's medical information is used and disclosed. This notice must inform the patient how to apply their rights under the rule. The notice also instructs the patient how to file a complaint with their health care provider and with the DHHS.

A patient's information disclosures must be accounted for an in an official log maintained by the hospital records administration. Anyone or any organization that requires access to patient records must be accounted for. A patient can find out who has accessed their health records for up to six years prior. Patients can file a complaint with their health care provider and/or with the DHHS if they believe a health care provider or health plan has violated their privacy.

Under HIPAA, a privacy officer is appointed, all staff are trained, and formal safeguards are created. These new requirements oblige a spotlight on privacy.

Penalties are sanctioned by the HIPAA Privacy Rule. The DHHS may impose a civil fine of up to \$25,000. In the most severe cases, the U.S. Department of Justice (DOJ) may perform a criminal investigation. If the DOJ becomes concerned, violators could receive a jail term of up to 10 years and a fine of up to \$250,000.

4. Security

The HIPAA Security Rule applies specifically to Electronic Protected Health Information (EPHI). Once again, the primary objective of the Security Rule is to protect the confidentiality, integrity, and availability (CIA) of EPHI when it is stored, maintained, or transmitted. All healthcare providers must preserve sensible and suitable administrative, physical, and technical safeguards to protect the CIA of their EPHI against any reasonably anticipated risks. The final Security Rule became effective as of April 21, 2003.

The Security Rule's requirements are structured into three categories: administrative safeguards, physical safeguards, and technical safeguards. The Security Rule has 36 implementation specifications, which are further divided into two types: required (14) and addressable (22). Required specifications are critical and CEs must implement them. CEs have three choices, however, for handling addressable implementation specifications:

- If a specific addressable implementation specification is determined to be reasonable and appropriate, the CE must implement it.
- If implementing a specific addressable implementation specification is not reasonable and appropriate, but the overall standard cannot be met without an additional security measure, a CE must:
 - a. Document why it would not be reasonable and appropriate to implement the implementation specification; and
 - b. Implement and document the alternative security measure that accomplishes the same purpose as the addressable implementation specification.

If implementing a specific addressable implementation specification is not reasonable and appropriate, but the overall standard can be met without implementation of an alternative security measure, a CE must document:

- a. The decision not to implement the addressable specification;
- b. Why it would not be reasonable and appropriate to implement the implementation specification; and
- c. How the standard is being met.²⁸

a. Administrative

Administrative safeguards represent nearly half of the Security Rule's standards. It mandates documented policies and procedures for conducting everyday operations, the behavior and access of employees to EPHI, and the range, expansion, and employment of security controls.

b. Physical

Physical safeguards are a sequence of requirements intended to shelter a practice's EPHI from unlawful physical access. The practice must limit physical access while permitting authorized access.

c. Technical

Technical safeguards are a number of requirements for using technology to defend EPHI, predominantly controlling access.

Although HIPAA has standardized the safeguard of patient information, protecting information is not a new concept. With the growing use of technology within the health care sector, many states and agencies have redefined the policies and practices for collection and dissemination of private information. In the past decade the use of electronic medical records (EMRs) has greatly increased and they are now employed in many practices. Provider networks have been established between affiliated physicians for sharing patient information. These types of scenarios have contributed to a setting that is susceptible to the compromise of patient information.

The responsibility for maintaining a secure electronic health information atmosphere is principally that of health information system security professionals.

²⁸ Steven Weil, HIPAA Security Rule, http://www.securityfocus.com/infocus/1764.

However, every employee at their respective facility must be familiar with a broad range of electronic security measures to avoid unintended compromise of patient information.

5. HIPAA Applicability Outside of the United States

The DHHS does not have the jurisdiction to enforce the provisions of HIPAA in foreign countries. Moreover, while a foreign business may contractually agree to protect PHI and comply with HIPAA to the same extent as an American company, there is nothing to bind them if they later decide not to comply, especially if that provider is located in another country.

The Europeans have a law somewhat similar to HIPAA, the EU Privacy Directive. Also known as the EU Data Protection Directive (Official Name: Directive 95/46/EC of the European Parliament and of the Council of 24 October 1995 on the protection of individuals with regard to the processing of personal data and on the free movement of such data²⁹), it requires organizations to implement personal data policies to include:

- Transparency: Data must be processed fairly and lawfully.
- <u>Purpose Limitation</u>: Data must be collected and possessed for specified, legitimate purposes and kept no longer than necessary to fulfill the stated purpose.
- <u>Data Quality</u>: Data must be accurate and up-to-date.
- <u>Data Transfers</u>: The data transfers policy restricts authorized users of personal information from transferring that information to third parties without the permission of the individual providing the data, or data subject. In the case of data transfers across national boundaries, the Directive prohibits data transfers outright to any country lacking an "adequate level of protection," as determined by the EU.
- <u>Special Protection for Sensitive Data</u>: The special protection policy requires restrictions on, and special government scrutiny of, data collection and processing activities of information identifying "racial or ethnic origin, political opinions, religious or philosophical beliefs . . . [or] concerning health or sex life." Under the Directive, such data collection or processing is generally forbidden outright.

²⁹ Fact Sheet on the European Union Privacy Directive by John D. Woodward, Jr., Esq. & Gary Roethenbaugh http://www.dss.state.ct.us/digital/eupriv.html.

- <u>Government Authority</u>: Each EU member state must create an independent public authority to supervise personal data protection. The EU will oversee the Directive's implementation and will engage in EU-level review of its provisions.
- <u>Data Controllers</u>: Organizations processing data must appoint a "data controller" responsible for all data processing, who must register with government authorities.
- <u>Individual Redress</u>: A data subject must have the right to access information about himself, correct or block inaccuracies and object to information's use.

Article 1 of the Directive requires member states to protect the "fundamental rights and freedoms of natural persons, and in particular their right to privacy with respect to the processing of personal data." In essence, the EU has made privacy a fundamental human right.

As mentioned earlier, the U.S. has no jurisdiction outside its borders. The concepts of HIPAA can provide humanitarian medical agencies with a roadmap for the safeguarding of patients data. Though there may be some unwillingness by some foreign humanitarian organizations to follow an American Law, it should be strongly encouraged that if HIPAA is not the standard, that some standard should be developed to safeguard patient's information.

C. USE OF E-MAIL

Electronic mail (e-mail) is a communication instrument currently used by hundreds of millions of people worldwide. Some physicians have been communicating with their patients by e-mail for many years. Rightfully so, this element of patient care is being scrutinized. E-mail can complement the patient's experience and greatly improve the patient's access to care. However, as discussed in the HIPAA section above, some of the information within e-mail may require protection.

E-mail is more enduring than oral conversations and often more unstructured than the handwritten word. E-mail can be duplicated or forwarded with the press of a button, and copies can linger on backup computer systems for a very long time. E-mail can also be easily altered and forged. Though e-mail makes conveying detailed patient care instructions easy and does not rely on interpretation, e-mail can include files and/or links to supplementary non-patient information.

E-mail is a dynamic tool that if secured could be used to relay non-medical information, medication, dressing instructions, patient education materials, lab results, appointment reminders, and prescription refills. Physicians could make general announcements to their entire patient population about various issues. E-mail could also allow medical teams that are spread out throughout a region to communicate and share ideas.

E-mail shares all of the same legal and ethical obligations that direct other forms of doctor-patient communication. Physicians who utilize e-mail in their practice must obtain written informed consent from patients before e-mail is employed. There is also the concern that once a physician starts this practice, they will be flooded with e-mails they will not have time to answer, or have less time to see paying patients. Physicians have a duty to provide timely responses to patient inquiries and maintain strict confidentiality and integrity at all times. Physicians need established policies about the types of conversations that they will enter into with patients and manage the expectations of the patient. There must also be a system to make sure that as medical teams rotate out of a country, the patient has the new medical teams e-mail addresses to guarantee continuity of care.

D. THE COST OF SECURITY

The concept of network security is enormous and there is no one solution that will fit all telemedicine suite needs. Also, the costs of the solution to vulnerability should not be more than the value of the information that is being protected. To establish the amount to spend on a countermeasure, the annual loss expectancy (ALE) must be calculated. To calculate the ALE, the annualized rate of occurrence and the single loss expectancy needs to be identified first.

Historical data can supply information about how often this vulnerability has happened in the past. There are many sources for historical data. For example, to identify how often a neighborhood has burglaries, visit a crime report website or call the police precinct in that neighborhood. To know how many viruses were released last year, go to Carnegie Mellon's CERT website (http://www.cert.org). Once the frequency of such events is known within a three month period, six months or year, then the annualized rate of occurrence (ARO) can be determined.

Once the ARO has been calculated, make a comparison to the financial loss connected with an asset. This is calculated by looking at the cost of fixing or replacing the asset. For example, if a server failed, a new server would be purchased and countless hours would be spent building the new server and installing the backup tapes or hiring an outsourcing firm to provide the restoration service. There may also be down time while the new server is being purchased and rebuilt. The monetary loss of the equipment would include the price of new equipment, the hourly wage of the employee building the server, and the cost of employees unable to perform their work. When the dollar value of the down server loss is calculated, this provides total cost of the risk, or the Single Loss Expectancy (SLE). This is one instance of failure.

The next step is to budget for the possibility that the risk will happen. Use the ARO and the SLE to find the annual loss expectancy (ALE).

$$SLE \times ARO = ALE$$

If the probability of server failure is 10%, this would be the ARO (.10) of the risk. Suppose the server was the main server for the site and the site generates about \$100,000 an hour, and it is estimated that the server takes approximately four hours to rebuild. The cost of the new server is \$10,000, thus making the grand total for this event \$410,000. This would be the SLE of the risk. Multiplying the SLE by the ARO, will show the cost annually. The method below provides the ALE for this example:

$$$410,000 \text{ x} .10 = $41,000$$

This figure would be used to decide if a backup server is needed or if the workload should be distributed over many servers. The costs of those initiatives would be compared to the ALE. This model works whether a humanitarian medical organization is considering backup servers or deployment of a telemedicine suite in the field.

E. FUNDAMENTALS OF NETWORK SECURITY (CIA)

It is important to discuss some basic security technologies when deciding how to protect a mobile medical practice. Some of those technologies include firewalls, Secure Sockets Layer (SSL) and virtual private networks (VPNs).

Before a mobile medical practice can provide protection from an outside threat, it must first protect itself from the inside. The insider threat is the biggest threat to any network. These are the employees of the company that have user accounts and various levels of trust within the company. It is important to note that the insider threat can cause problems unintentionally or maliciously. They could launch a virus because they are being fired or they can launch a virus because they did not know that the e-mail attachment was a virus. Either way, the network is now infected. Technological solutions can be applied to the network to avert unauthorized access from outside the enterprise, but internal threats also must be recognized. Mazu Networks conducted a survey which was issued to technology professionals from 229 U.S. enterprises, each with more than 1,000 employees. Survey questions focused on attacks that originated directly from within their networks.³⁰ The survey found that 23% reported an internal security breach by a credentialed person (i.e. employee or contractor with network access). Of those respondents who had internal breaches, 40% said that the breach led to the interruption of a critical business system, 38% said that the breach resulted in data corruption/loss, and 17% claimed that the breach led to intellectual property theft.³¹

Most of the time, the network is compromised by employees who do not have malicious intent. These employees were either careless or uneducated in security awareness. These mistakes are made even by information technology staff, so it is vital to hold, at a minimum, annual training and monthly e-mail reminders for all employees to reinforce the security policies.

Once again, there are three primary elements in securing electronic data:

- 1) Confidentiality The system contains information that requires protection from unauthorized disclosure.
- 2) Integrity The system contains information that must be protected from unauthorized, unanticipated, or unintentional modification, including the detection of such activities.
- 3) Availability The system contains information or provides services that must be available on a timely basis to meet mission requirements or to avoid substantial losses.

³⁰ Mazu Insider Threat Report http://www.mazunetworks.com/news/threat_report/) 8/29/05

³¹ Mazu Insider Threat Report

Each of the above elements protect against one of three general types of network attacks:

- 1) Disclosure Sensitive data being disclosed to the public or individuals not normally authorized to receive it.
- 2) Alteration Data that is changed or replaced.
- 3) Destruction Data that has been destroyed.

Firewalls are a solid choice for preventing external attacks on the infrastructure. While firewalls do provide a layer of protection, no single technology should be relied on solely for overall security. To start with, firewalls protect the network from the outside, but do little to counter the insider threat. A firewall is an appliance that is located between the internal network and the Internet (see Figure 9). If configured correctly, it should read the addresses of all communication directed to the internal network and make a decision whether to allow or deny access.

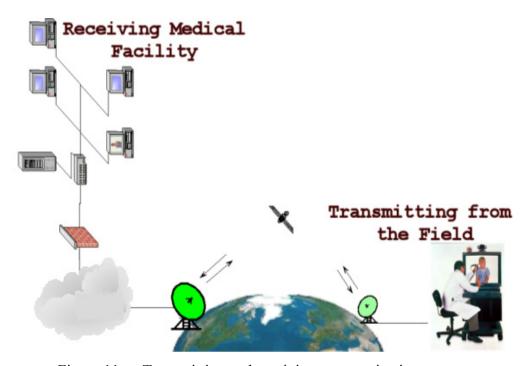


Figure 11. Transmitting and receiving communications

1. Virtual Private Networks and Secure Socket Layer

Virtual private networks (VPNs) are a solution that many medical facilities are choosing for secure communications with partners that use the public infrastructure. One of the key elements of VPNs is the encryption of data, so if someone is able to intercept

the data, it will be very difficult to decrypt. Additionally, the VPN connection is protected from detection through tunneling. Figure 10 depicts an example of the VPN setup.

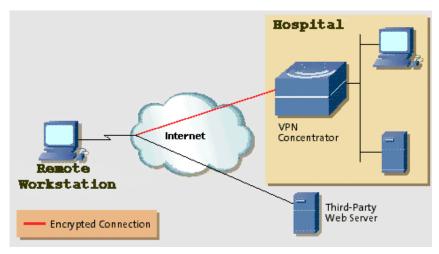


Figure 12. VPN tunneling³²

An increasing number of vendors are offering VPNs with a Secure Socket Layer (SSL) add-on. For many years, VPN was considered to be a challenger to SSL, but the two are seen as complementary to one another. SSL is a protocol that encrypts and authenticates communication between a server and client. SSL was designed by Netscape and has become the industry standard for protecting communication over the Internet. The main way to know that communications are being conducted via SSL is that the URL starts with the letters "https". A secure connection is supposed to ensure that the data being exchanged cannot be captured or viewed.

³² VPN Split Tunneling Diagram http://uwadmnweb.uwyo.edu/InfoTech/vpn/images/split_tunnel.gif 8/29/05



Figure 13. Secure Socket Layer handshake³³

Prior to January 2000, SSL was not allowed to be shipped outside of the U.S. with 128-bit encryption due to the fact that any software product that contained strong encryption was classified as munitions by the U.S. As a result, prior to SSL version 3.0, there existed 40- or 56-bit SSL encryption. After January 2000 these restrictions were lifted and now a 128-bit version of SSL is accessible worldwide. 128-bit encryption is about 309 septillion times larger than 40-bits. There is no computer currently in existence that has the computing power to decipher such an encryption. VPNs and SSLs are just two examples of implementations for secure communications over the Internet. A humanitarian organization that is deployed in one country and has a headquarters or some other entity should be employing some mechanism to communicate securely. If the humanitarian organization is deploying a medical team, they must have some way of securing the data.

F. SECURITY TRAINING

Security training is probably one of the most important elements of information security, yet one of the most ignored. The nonprofit National Cyber Security Alliance conducted a study that found that only 60% of end users knew when they had last updated their computer antivirus program. The study also found that about one-third of users felt they had a greater chance of winning the lottery or being struck by lightning than of being hit by malicious code.³⁴

³³ Introduction to Secure Socket Layer, Cisco Systems, http://www.cisco.com/warp/public/cc/so/neso/cxne/cxdimng/wpsot-wp.pdf, 8/29/05

³⁴ Kathleen Coe, Employee awareness: The missing link. Symantec Corp, http://www.computerworld.com/printthis/2005/0,4814,101990,00.html, 8/29/05

Another study conducted by Ernst & Young found more than 70% of the 1,233 organizations surveyed failed to list training and raising employee awareness of information security issues as a top initiative. Even though 93% of businesses have antivirus software in place, 72% of businesses received infected e-mail files during 2004, and roughly two-thirds of large businesses experienced virus infections or denial-of-service attacks last year. And still, less than half of Ernst & Young's respondents provide their employees with ongoing training in security. ³⁵

Finally, a study by the Meta Group found that 75% of organizations have found that lack of user awareness damages their security programs' effectiveness. Organizations across every industry must take the time to develop a security awareness program. ³⁶ This data begs a question: with security vulnerabilities growing in number each year, why are companies not conducting this simple countermeasure?

A successful security awareness program must be tailored to the needs of each organization. Organizations such as the System Admin Network Security (SANS) Institute have created an online security awareness program, but even a high quality program still requires some customization.

The first step to creating a successful security awareness program is establishing the knowledge level. Some employees may understand packet analysis and some employees may have trouble printing documents. Once the baseline knowledge has been established, it is important to develop a program that will not put the advanced asleep, but will not have the beginners' eyes glazed over.

After the training has been completed, trainers should begin updating for the following year and develop a monthly newsletter or e-mail to reinforce the training and refresh everyone's memory. There is a common saying: "Employees do what you inspect, not what you expect." Employees' vigilance should be measured to ensure that they are practicing what they learned in their training. Finally, as the knowledge level of the employees grows, the level of material that is presented should likewise increase.

³⁵ Kathleen Coe

³⁶ Kathleen Coe

Finally, as discussed earlier, tools like VPN and training must be financially justifiable. If the value of the data is \$100 and a VPN cost \$500, then it is not a smart financial decision. Training is something that can be very expensive or very cheap, but the training must be justified. Sending someone to a \$4,000 course to protect \$100 worth of data does not make sense. Furthermore, a hastily formed network and any medical suite must look at not only these but a plethora of other security tools to include, but not be limited to, antivirus programs, firewalls, anti-spyware, security audits and other mechanisms that can be deployed to ensure that the network is as secure as possible.

VI. TELEMEDICINE

A. HISTORY

Telemedicine has long existed and has encountered many changes as medicine and communication devices have evolved. The first and simplest form of telemedicine was the telephone. The first documented use of technology to provide health care at a distance occurred in 1920 at Haukeland Hospital in Norway, where radio links were established to provide health care support services to ships at sea.³⁷

The National Aeronautics and Space Administration (NASA) became a major player in the development of telemedicine when it began monitoring astronauts' physiological data from space during missions. NASA also sponsored the Space Technology Applied to Rural Papago Advanced Health Care (STARPAHC) program from 1972 to 1975. This program provided an Indian reservation with medical care. The main delivery of care was through a van supplied with medical equipment. The program eventually ended due to high expenses and technological limitations.³⁸

B. WHAT IS TELEMEDICINE?

Telemedicine is the delivery of conventional medicine where the patient and the provider are geographically separated. This is possible through the use of technology and telecommunications. Another common definition of telemedicine is the art of transmitting medical data electronically from one location to the other.³⁹ The World Health Organization defines telemedicine as the delivery of healthcare services, where distance is a critical factor, by all healthcare professionals using information and communication technologies for the exchange of valid information for diagnosis, treatment and prevention of disease and injuries, research and evaluation, and for the continuing education of healthcare providers, all in the interest of advancing the health of individuals and their communities"⁴⁰

³⁷ Henry A. Smith & Ronald A. Allison, Telemental Health: Delivering Mental Health Care at a Distance, http://telehealth.hrsa.gov/pubs/mental/home.htm, 8/3/2005.

³⁸ Likang Chin, The Use of Telecommunications in Clinical Medicine, http://www.jyi.org/volumes/volume3/issue1/features/chin.html, 8/3/2005.

³⁹Likang Chin

⁴⁰ Sandeep Sinha, Telemedicine, an emerging paradigm for delivering affordable quality healthcare, http://www.expresshealthcaremgmt.com/20050315/telemedicine01.shtml, 8/3/2005.

Clinical information can take many forms. It can be streaming video, still images, scans or electronic patient records, discussion between providers, a combination of any or all of these forms. Transmission of this data can take many forms as well: telephone lines, DSL, cable modem, satellite, and wireless equipment. Transmission media will be discussed in greater detail later in this chapter. Telemedicine has enjoyed a great deal of success in the areas of radiology, pathology, dermatology, oncology, surgery, cardiology, psychiatry, and home health care.⁴¹

C. BENEFITS OF TELEMEDICNE

The capability to send information over a distance can be utilized for diagnosis and treatment, patient and staff education, and also medical information. Telemedicine is generally carried out through asynchronous or synchronous communication. Synchronous communication offers examinations and discussions that take place in real-time, either between a patient to a provider or from provider to provider. Asynchronous communication offers delivery of images and clinical information, which is viewed and interpreted at a later time.

Telemedicine, as seen in STARPAHC, is motivated by the need for convenient, affordable, and accessible health care services. Additionally, telemedicine now allows modern medicine to reach underserved populations. Telemedicine is a promising way to deliver medical care to large populations with a limited or overwhelmed medical staff. Telemedicine lowers the cost of sending qualified professionals to these remote areas. Some other benefits of telemedicine for humanitarian disasters are:

- o Reducing the number of visits by patients to emergency rooms
- Avoiding unnecessary and costly travel and full time employments of specialty providers
- Providing patient education
- o Monitoring vital signs, thus reducing the number of staff needed

The uses of telecommunications technology in the delivery of medical care are endless, and can provide considerable savings. The US military, long at the forefront of telemedicine research, supplied data gathered from their EMR, the Composite Healthcare System (CHCS). A group of experts examined the data and determined that 36% of

⁴¹Likang Chin

2,156 MEDEVACs could have been treated in their present location using a telemedicine system. The study further stated that this represented annual savings to DoD of approximately four million dollars.

A different panel of medical experts with telemedicine experience reviewed a sample of patient visits collected over a 1-year period and estimated the man-day savings and quality-of-care enhancements if telemedicine technologies are employed.

Costs:

Off-the-shelf telemedicine equipment prices + installation + maintenance + training + communication costs

Savings:

The panel concluded that if telemedicine was used, 19,000 consults in a year – 7% of all patient visits – would have been initiated and 17% of MEDEVACs, at a cost of \$4,400 per MEDEVAC, would have been avoided (155,000 travel miles),

To worsen the circumstances, the companies providing MEDEVAC transportation experienced their deadliest year to date. These deaths are not due to malpractice, but to crashes. The Vietnam era of helicopters airlifting out injured soldiers gave birth to the air-ambulance industry. Air ambulance operations began in the 1970s and have continued to grow ever since. The requirement for MEDEVACS has also increased five percent per year at a price that ranges between \$5,000 to \$10,000 up to \$25,000.42

The air ambulance industry is not only drawing criticism over their safety, but there is also speculation there could be efficacy issues of possible overuse. In January 2005, the *Journal of Prehospital Emergency Care* reported that a study of 37,500 helicopter-transported patients determined that two in three had only minor injuries, one in four had injuries too minor to require hospital admission. Additionally, Stanford University trauma surgeon Clayton Shatney conducted a study of 947 patients flown to Santa Clara Valley Medical Center and concluded that the air ambulance service only saved the lives of approximately nine of the 947.43

⁴² Safety record of air ambulance industry under scrutiny, http://www.post-gazette.com/pg/2005063/466365.stm, 8/4/2005.

⁴³ Safety record of air ambulance industry under scrutiny.

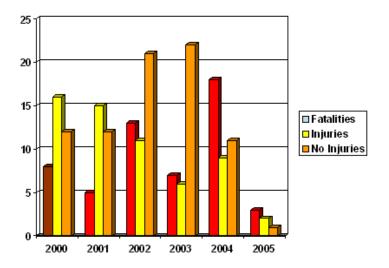


Table 6. Air Ambulance Crash Statistics⁴⁴

D. QUALITY OF TELEMEDICINE

Telemedicine has two areas that can be evaluated for quality. To effectively manage telemedicine as a means of delivering medical service, we must understand both:

- 1. Functional quality, which addresses personnel, technology, physical environment, and customers acting as quality-generating resources in the telemedicine encounter process.
- 2. Desired clinical encounter results including diagnostic accuracy, diagnostic impact, and therapeutic impact as well as other contributing success factors including patient and direct user (medical staff) satisfaction. Additionally, quality must be compared to the conventional doctor's visit.⁴⁵

A study conducted in 1998 evaluated the utilization of telemedicine between two hospital systems - the University Hospital of Basel (Switzerland) and the University Hospital of Zurich. The quality of transmitted images versus the quality of live images was determined. Located 120 miles apart, the two hospitals were connected via ISDN with a transmission rate of 128-kilobit/s. For two months (May and June), 112 digestive or endocrine surgery patients were evaluated by radiologists and surgeons using both transmitted and live magnetic resonance imaging (MRI) and tomographic scans. Of the transmitted images, 92.9 percent achieved ratings of "good" or "excellent" as compared to 95.5 percent of the live images - a difference of only 2.6 percent. In all scans, whether live

 $^{^{44}}$ Medevacs mishaps, http://www.iasa.com.au/folders/Safety_Issues/RiskManagement/medevachelo.html, 8/4/2005.

⁴⁵ Cynthia LeRouge, Alan Hevner, Rosann Collins, Telemedicine Encounter Quality: Comparing Patient and Provider Perspectives of a Socio-Technical System, http://csdl2.computer.org/comp/proceedings/hicss/2004/2056/06/205660149a.pdf, 8/3/2005.

or transmitted, 100 percent of target organs were distinguishable. However, fine organ structure was visible in only 89.3 percent of the transmitted scans versus 95.5 percent of the live scans. The structures of the organs as well as pathological findings could be examined in 98.2 percent of the transmitted images and 99.1 percent of the live images. Diagnosis could be made from 84.8 percent of the transmitted documents as compared to 93.8 percent of the live documents. The disparity between the percentage in loss of quality (2.6) and the percentage in loss of diagnosis (9.0) indicates that other factors exist when making clinical diagnosis, such as choice of radiological studies, additional clinical information required, etc. The study did confirm the hypothesis that real-time consultation is not necessary to provide patients with accurate diagnoses.⁴⁶

E. BARRIERS TO TELEMEDICINE

The growing popularity of telemedicine has spurred enormous growth. Despite that growth and the benefits of telemedicine, barriers continue to exist. Some of these barriers include licensure, reimbursement and medical malpractice.

1. Licensure

In a humanitarian disaster, the need for professional medical practitioners is enormous, but how does an NGO ensure the individual in front of them has the qualification? The US military has a similar problem. They are a global organization that has employees from all 50 States and from Puerto Rico and Guam. They credential each provider based on the license they have received from their home state. The military provider does not need to get a license for the state in which they are currently assigned to work in a military treatment facility. When they deploy, they deploy under the credential granted by their home base, eliminating the costly process of requiring every provider to get a new license every time they transfer to a new duty station. See Appendix A for a list of sites to verify a US doctor's license.

2. Lack of Reimbursement

Despite the demands of the Health Insurance Portability and Accountability Act and the availability of advanced technology, reimbursement for telemedicine has not yet come to fruition. If organizations cannot bill for telemedicine, the motivation to start such ventures is low. The Centers for Medicare and Medicaid Services (CMS) has authorized telemedicine reimbursement only in Alaska and Hawaii. Reimbursement is

⁴⁶ Likang Chin

\$20 for each patient consult. In 18 states, CMS will pay \$20 per consult for all the live videoconferencing, but many physicians claim they do not have time for live conference. Blue Cross of California has decided to pay for telemedicine, thereby extending care to underserved communities and reducing costs for chronic diseases that often go undiagnosed and uncontrolled.

3. Medical Malpractice

Health care systems must satisfactorily supervise and credential staff providing services under their umbrella. However, it is possible a telemedicine host could have no affiliation with remote physicians and hospitals other than their involvement in the network. Anyone hosting a telemedicine site must ensure that each provider is credentialed. This not only protects the facility, but more importantly protects the patients. This issue becomes even muddier as telemedicine service moves into the international territories. The answer is in a set standard by everyone in the network. Until federal or international laws are created, it is important that a set standard of credentialing providers is established.

4. General Barriers

Telemedicine barriers are not just limited to those mentioned above. Some other barriers are those experienced by every sector and fall under general management when introducing a new concept. The barriers fall into two main categories: technology and non-technology. Usually the technology barriers are more due to fear and can usually be resolved with training. The non-technology barriers are a bit more difficult to resolve due to hidden agendas.

5. Non-Technology Barriers

a. Inadequate Leadership

In a humanitarian organization, staff members can be spread all over the world. If there is not a champion on the ground, the project will have little success. The project coordinator should be a central resource with a strong understanding of all details of the project. If the project coordinator role is divided among various staff members, the project could struggle if they do not have a good working relationship.

b. Lack of Physician Buy-In

Physicians run the world in a medical environment - without them, the medical facility has no customers. If the physician in the local area does not endorse the project, the project will stall and be at risk for termination.

c. Technical Support Unavailable

Unfortunately, it is crucial to have an IT specialist on site to troubleshoot problems that arise with use of the equipment. In a medical humanitarian organization, the level of technical knowledge can vary. Some staff know enough to be dangerous and may attempt to tamper with workstation settings, disrupting access to applications. Other staff members may use the computer(s) to check e-mail and communicate with others back home. This can introduce viruses to the system or otherwise compromise the project. Having an IT staff member that can return workstations to functional status is very valuable.

d. Interoperability

Interoperability is important with an EMR, but is also vital with a telemedicine service. If the medical information cannot be shared, then the service is useless. In the EMR section, medical information was discussed, but medical images can also take many forms. To ensure interoperability, the DICOM standard has been created to share medical images.

F. THE DIGITAL IMAGING AND COMMUNICATIONS IN MEDICINE (DICOM) STANDARD

This DICOM Standard, which stands for Digital Imaging and Communications, is a global standard that is used in practically all hospitals worldwide. Its structure is designed to facilitate interoperability of medical imaging equipment used to produce, store, display, process, send, retrieve, query or print medical images and derived structured documents as well as to manage related workflow by specifying:

- o For network communications, a set of protocols to be followed by devices claiming conformance to the standard.
- O The syntax and semantics of commands and associated information which can be exchanged using these protocols.
- o For media communication, a set of media storage services to be followed by devices claiming conformance to the standard, as well as a file format

- and a medical directory structure to facilitate access to the images and related information stored on interchange media.
- o Information that must be supplied with an implementation for which conformance to the standard is claimed.

The DICOM Standard does not specify:

- The implementation details of any features of the standard on a device claiming conformance.
- O The overall set of features and functions to be expected from a system implemented by integrating a group of devices each claiming DICOM conformance.
- O A testing/validation procedure to assess an implementation's conformance to the standard.
- The DICOM standard pertains to the field of medical informatics. Within that field, it addresses the exchange of digital information between medical imaging equipment and other systems. Because such equipment may interoperate with other medical devices, the scope of this standard needs to overlap with other areas of medical informatics. However, the DICOM standard does not address the breadth of this field.

1. Who Needs DICOM?

As discussed earlier with the HL7 standard, all hospitals, clinics, imaging centers and specialists need the DICOM standard if they wish to transmit medical images. Investing in equipment that conforms to the DICOM standard ensures interoperability with other clinics and medical facilities. More importantly, DICOM and HL7 have developed information linkages between the two standards. The DICOM Standard is expected to become an ISO reference standard by the end of 2005. It has been a European Standard for years. Wherever possible, DICOM utilizes relevant parts of other mature standards such as JPEG, MPEG and TCP/IP and other Internet standards.

G. SUCCESSFUL TELEMEDICINE DEPLOYMENT

Successful telemedicine programs are due to vigilant planning, strong management, committed health care professionals and support staff. In an environment that has been struck by a disaster, telemedicine may be the only way to fulfill the mission. The following are some key steps to successfully deploy a telemedicine operation:

1. On-Site Site Manager

As discussed earlier, the designation of an onsite manager responsible for the operation of each site is important. This individual can have other responsibilities, but

this person is responsible for telemedicine operations. The onsite manager is the liaison to direct patient care and must assure that all operations are conducted smoothly and efficiently. They will ensure that all personnel are adequately trained in the use of telemedicine devices to capture diagnostic quality images, data and sound.

2. Services Offered

It is important to define the scope of the program. Generally, this will involve an analysis of the needs of the area where you will deploy personnel. For example, victims of the tsunami disaster will require a high number of general practice providers on site, but will need to have specialty providers available for consultation. One of the first tasks is to determine the clinical functionality of each site. The functionality of each site is dictated by the specific medical issues to be addressed at the site. Telemedicine applications today exist across almost all medical specialties and a great deal of functionality can be introduced into each site.

Increasingly, medical devices are interoperable, meaning that multiple devices may operate using a single desktop or laptop personal computer. With the increase in interoperability, the functionality of each site can be expanded; often only by purchasing devices intended to achieve the specific functionality.

3. Kit Design

Kits should be designed for deployment. Because of the special electrical, telecommunications and computing requirements of telemedicine, a standardized set of equipment and applications should be employed. If the various kits differ greatly, staff could become confused. Proper allowance must be given to the installation of required cabling in a way that assures access for maintenance and upgrades, while at the same time maximizing patient and user safety. Consideration should be given to work flow and patient activity within the room to avoid hazards which can arise from exposed cabling.

4. Site Selection

Once the team has arrived in country, some aspects of site selection should be considered. Medical devices used in telemedicine will capture images, data and sound and transmit the information electronically. These devices require a power supply, knowledge that the equipment is compatible with the power of that country, or if not that a converter will be required.

Another important consideration is lighting. Telemedicine programs which anticipate live transmission of video images must obtain proper color rendition and image brightness. This may require specific lighting to capture the best images.

Finally, consideration should be given to the location of the room within a facility, the use of the room for non-telemedicine purposes, accessibility to caregivers, and the means of access and egress for patients. Ultimately, the goal is to mainstream telemedicine services into everyday clinical activity. The location of this plays an important role in achieving this goal.

5. Identify Affected Specialties

Based of the mission, the program should identify the medical specialties which are needed. In each of these medical specialties, a clinical liaison should be designated for purposes of managing consults for each specialty. Based on the size of the population being served, this can be one or several individuals. Having more than one professional in each specialty trained in the use of telemedicine systems also facilitates expansion of the program as volumes increase. Additionally, having specialists in several countries is advantageous to avoid gaps in service.

H. IMPLEMENTATION

In many cases, the sheer size and complexity of the organization dictates that it be implemented in stages. In other cases, budgetary constraints may require phased implementation of a program. Whatever the reason, the process of phased implementation of a telemedicine program may dramatically affect its success.

1. Phased Implementation

There are generally two approaches to the phased implementation of a telemedicine program. In one approach, a party will introduce the telecommunications infrastructure and, in the case of live applications, the videoconferencing equipment, at all sites with no implementation of telemedicine devices in the first phase. The goal is to build out the telecommunications infrastructure in one phase, and then add the medical devices intended to be used in the telemedicine program at a later date.

One advantage of this approach is that all telecommunications infrastructure will be implemented in a single phase, which may lessen costs. This approach, however, has several potential disadvantages. After completion of the first phase, only limited clinical telemedicine may be conducted. A disadvantage of this approach is that when telemedicine devices are fully deployed in a second phase, the result is a finished, but as yet untested, system. In this case, further adjustment and modification of the telemedicine system may be required.

The other approach to phased implementation involves development of a limited number of telemedicine sites, including telemedicine devices, with full functionality in the intended medical applications. These sites then operate to test the business and operational model under live conditions in country. To the extent any modification or adjustment of the program is required to achieve success; those modifications can be accomplished with a minimum of expense and incorporated in the rollout of additional sites. This approach also permits intense training of a limited number of professionals in the use of telemedicine devices and the system. These professionals then serve as mentors and can be divided up to other teams and continue to train other professionals and lowering training costs.

One disadvantage of this approach is a potentially higher cost for telecommunications infrastructure and videoconferencing equipment. A large purchase of equipment can often lower the cost of each unit. Carefully consider the budgetary limitations of the organization, expectations regarding program performance at each phase of implementation, training requirements, and the potential for program modifications occurring after implementation. Careful planning of the program implementation schedule will help minimize expense and maximize the likelihood of success

I. THE ROLE OF NURSES IN TELEMEDICINE

Receiving and exchanging medical information through wires and tubes is not a new role for nurses. Telephone triage has long been a responsibility of the clinical nurse. The shortage of nurses has been a key motivator in the growth of the telemedicine nurse. There are prisons and school systems that cannot afford to have the nurses they need. Telemedicine has leveled the playing field. A telemedicine home care study in California projected that nurses could see almost four times as many patients a day by computer, and that the average computer consultation lasted just 18 minutes, compared to 45 minutes in person. Nurses' salaries are also a fraction of a physician's salary, yet they

still possess the clinical knowledge to relay vital signs, symptoms and other pertinent physiological information to a physician being consulted at a healthcare facility.

Telemedicine security is not any different from medical record security or general information security, discussed in greater detail in Chapter Four. It is important to note, that for any telemedicine initiative to work, information security must be in the earliest stages of planning and should be one of the highest priorities. Although security regulations for HIPAA do require protection, there will be issues when operating outside the U.S. To be successful, it is also imperative that every person responsible for care understand the risks of security vulnerabilities and the importance of guarding the patient information. There is no technology or policy that can guarantee that a medical practice will be 100% secure.

VII. EQUIPMENT

The Fly-Away-Kit (FLAK) to support the forming of Hastily Formed Networks (HFNs) developed by Capt Dwayne Lancaster to support of Humanitarian Assistance and Disaster Relief (HA/DR) operations is this author's recommendation as the technology of choice for voice and data requirements. The FLAK (see figure 13) is the compilation of gear that supports "flexible connections between the reach-back solution and the last-mile solution."⁴⁷ Ethernet is the current desired interconnectivity with other devices. The FLAK comes equipped with a Tachyon Satellite CPE, Cisco 2811 Router, Redline AN50e, MeshNetworks Intelligent AP which supplies all the essential components and the mobility for travel via commercial airplane.



Figure 14. Fly-Away Kit

In addition to the FLAK, the medical provider will need an EMR either in a hand held device or in a laptop computer. Both technologies have their advantages and disadvantages. Handheld devices' computing power and functionality have come a long way. Smartphones and handhelds can perform the following functions:

- Send and receive e-mail with attachments
- Work Microsoft Word, and Excel files, and PowerPoint files
- Project slide shows directly to LCD projectors
- Surf the Web
- Take handwritten, voice or typed notes.
- If equipped with a camera, they can take pictures
- Include a calendar, alarms, and contact programs for time management
- Almost all IPAQs are now equipped with wireless

⁴⁷ Lancaster, David D., Developing a Fly-Away-Kit (FLAK) to Support Hastily Formed Networks (HFN) for Humanitarian Assistance and Disaster Relief (HA/DR), 6/2005

- Batteries last far longer and take less time to reach a full charge.
- Can be easily carried in a pocket.

A. CASE STUDY: THE ARMY'S SOLUTION

The problem of providing up-to-the-minute medical information to first responders on the battlefield has always posed significant challenges. U.S. Army battlefield medics are now equipped with a software application developed by the Army and deployed on the HP iPAQ Pocket PC that will assist them in making an informed decision. The Battlefield Medical Information System - Tactical (BMIS-T) is a diagnostic tool that runs on the HP iPAQ Pocket PC. Using a simple point-and-click interface, medics enter information by tapping on the screen with a stylus. BMIS-T users can document clinical information within three to five minutes. Information can be transmitted wirelessly to a central data repository where it can be accessed at Army base medical facilities. If there is no wireless communication available, the information can be stored and sent once a connection is established. By assembling and analyzing data captured on BMIS-T by medics in the field, military commanders can quickly assess potential threats to their troops at the theater level.

Running on Windows Mobile-based Hewlett-Packard iPAQ Pocket PCs, BMIS-T holds service members' complete medical records, including immunization status, dental and ophthalmic records, and known drug allergies. Medical care providers enter information by tapping on the screen and using menus. To simplify input, BMIS-T uses natural language processing to turn stylus taps on anatomical figures on the screen into textual clinical notes. The handheld assistant standardizes how signs, symptoms, and assessment are recorded and helps ensure that the correct treatment course is followed. BMIS-T suggests a diagnosis and treatment plan that is based on the user's skill level. It also provides a full array of healthcare reference manuals. Developed in C++ using embedded Microsoft Visual Studio® 3.0 development system, BMIS-T currently writes XML files into folders, which are stored on the device until the device is synchronized. Upon synchronization, the files are passed up to repository databases, where patient records are stored. To improve performance, future devices will use Microsoft SQL ServerTM Compact Edition to store patient records on the device. Devices can be synchronized through a cradle, wirelessly, or through a direct wired connection to the

Internet. BMIS-T also can store updates on a personal information carrier tag (P-tag), a flash memory device issued to some soldiers, with a backup saved to the central database. Data is encrypted by means of a conventional secret-key block encryption algorithm. Congressionally funded, the entire BMIS-T development program for two years cost a mere \$245,000.

More than 1,000 devices have been deployed and TATRC is starting a major acquisition program. This represents one of the first times within the military healthcare system that a technology has made the transition from research and development into an acquisition program. The White House medical staff uses BMIS-T for the president and his staff. The Special Forces Command received approval and funding from the Secretary of Defense to deploy BMIS-T to all care providers within its headquarters special operations command, which includes all military branches. Medical providers in the Army alone number around 50,000, according to Morris. This case study has enormous potential for a humanitarian organization in the field. As discussed in Chapter Two, there are many differences between a humanitarian aid organization and the U.S. Military, but there are also some similarities. This case study is relevant to any medical organization that deploys to an operational setting. A humanitarian organization could adopt a similar technology to deploy with their teams. This case study provides the data to support starting such a venture.

B. PURCHASING A HANDHELD PC

Handheld computers are rapidly becoming a very common tool for the clinician. Their uses range from electronic organizers to portable medical libraries. Prior to investing in a handheld computer it is important to determine how it will be used.

1. Important Factors When Choosing a Handheld

- Microsoft Office: Microsoft's pocket PC offers integration to the popular MS Office Suite.
- Medical Applications: Appendix C is a comprehensive list of medical software downloads for the IPAQ.
- Size: Most of the handhelds on the market are a reasonable size and will fit in most rear pants pockets.

⁴⁸ Mobile point-of-care solutions support medics on the battlefield. HP Telemedicine and Advanced Technology Research Center, http://www.tatrc.org/website bmist/HP-BMIS-T.pdf, 8/6/2005

• Price: The prices of handhelds range from \$150.00 to \$500.00. Pricing depends mostly on amount of RAM, display type (color vs. monochrome), and multimedia capabilities. As a general rule Pocket PC's are usually more expensive. The following table shows a list of the best-selling handhelds and their prices.

Palm m100	\$150.00
Palm IIIxe	\$200.00
Handspring Visor Deluxe	\$249.00
Compaq Aero 1550 Pocket PC	\$280.00
Handspring Visor Platinum	\$299.00
Palm IIIc	\$329.00
Palm Vx	\$400.00
Handspring Visor Prism	\$449.00
Palm VIIx	\$449.00
Casio Cassiopeia EM-500 Color Pocket PC	\$499.00
Compaq iPaq Pocket PC	\$499.00

Table 7. Best-Selling Handhelds, by Price

Tough Handhelds: The Itronix Q200 is the handheld of choice due to its ability to last in a rugged environment. It is an ultra-rugged Pocket PC designed for mobile workers who operate in demanding, mission-critical environments. Its high impact plastic and metal construction provides an exceptionally lightweight, rugged framework, with the strength to withstand the roughest outdoor handling and extreme weather conditions. At just 1.75 pounds, it can be easily clipped to a belt or carried on a wrist strap. Units range in price from \$2,600 -\$3,145.50

⁴⁹ Handheld Buying Guide, http://www.mdtool.com/palmguide.html, 8/4/2005

⁵⁰ Itronix Q200, http://www.itronix.com/products/handhelds/q200.asp, 8/4/2005

PRODUCT	PRICE
Itronix Q200, 128MB RAM, 1GB Disk	\$2,600.00
Itronix Q200, 128MB RAM, 2GB Disk	\$2,745.00
Itronix Q200, 128MB RAM, 4GB Disk	\$3,145.00

Table 8. Prices for the Itronix Q200

C. SKYPE: P2P TELEPHONY

Skype is a program that can be installed on a handheld computer. For Skype-to-Skype phone calls it uses the peer-to-peer ("P2P") technology used for file-sharing applications such as Napster. P2P telephony followed P2P, and Skype was founded to develop the first P2P telephony network. Internet-based telephony - Voice-over-IP - (VoIP) has been around for years but is now starting to break into the mainstream market.

The following are some of the techniques that Skype employs to deliver state-of-the-art IP-based telephony.

1. Firewall and NAT (Network Address Translation) Traversal

Non-firewalled clients and clients on publicly routable IP addresses are able to help NAT'ed nodes to communicate by routing calls. This allows two clients who otherwise would not be able to communicate to speak with each other. Because the calls are encrypted end-to-end, proxies limit the security or privacy risk. Likewise, only proxies with available spare resources are chosen so that the performance for these users is not affected

Several new techniques were also developed in order to avoid end-user configuration of gateways and firewalls, whose non-intuitive configuration settings typically prohibit the majority of users from communicating successfully. Skype works behind the majority of firewalls and gateways with no special configuration.

2. Global Decentralized User Directory

Most instant message or communication software requires some form of centralized directory for the purposes of establishing a connection between end users in order to associate a static username and identity with an IP number that is likely to change. This change can occur when a user relocates or reconnects to a network with a dynamic IP address. Most Internet-based communication tools track users with a central

directory which logs each username and IP number and keeps track of whether users are online or not. Central directories are extremely costly when the user base scales into the millions. By decentralizing this resource-hungry infrastructure, Skype is able to focus all of its resources on developing cutting-edge functionality.

P2P network technologies used by file-sharing applications would be almost suitable for decentralizing, but those networks are fragmented in nature – a search does not reach all nodes in the network. Clearly, in order to deliver high quality telephony with the lowest possible costs, a third generation of P2P technology ("3G P2P") or Global Index (GI) was a necessary development and represents yet another paradigm shift in the notion of scaleable networks. The Global Index technology is a multi-tiered network in which "supernodes" communicate in such a way that every node in the network has full knowledge of all available users and resources with minimal latency.

3. Intelligent Routing

By using every possible resource, Skype is able to intelligently route encrypted calls through the most effective path possible. Skype keeps multiple connection paths open and dynamically chooses the one that is best suited at the time. This has the noticeable effect of reducing latency and increasing call quality throughout the network.

4. Security

Encryption is necessary because all calls are routed through the public Internet. Skype encrypts all calls and instant messages end-to-end for privacy.

5. Super-Simple User Interface

Skype was designed to be simple to use, for anyone who can use Windows and telephones. The software works equally well and is simple to use also on other platforms where Skype runs (Pocket PC, Linux, Mac OS X).⁵¹

6. Minimum System Requirements

In order to use Skype, the handheld must meet the following minimum requirements:

- Windows Mobile 2003 for Pocket PC
- 400 MHz processor
- WiFi-enabled

⁵¹ Skype, http://www.skype.com/products/explained.html, 8/4/2005

• A headset with a microphone to use Skype. (Note, if the IPAQ has an integrated microphone that will have to serve as the microphone.)

D. STORAGE

Storing medical information is a difficult task in a hospital setting. Trying to secure it in an operational setting is even more difficult. A series of AES Encrypted USB Flash drives have been introduced that ensure confidentiality of sensitive data and information that is stored on their flash drives. Some of these USB 2.0 Flash Drives are currently undergoing testing for FIPS (Federal Information Processing Standards) certification. The drives utilize 256-bit AES Encryption to protect data stored on the drive and can be plugged into any available USB or USB 2.0 port and be used immediately. These drives work with Windows, Macintosh and Linux machines. It is important to note that the AES Encryption features do not yet work with Macintosh or Linux Operating Systems; however, the drive can be used as a basic storage device on both. ⁵²

An Internet connection is also needed for telemedicine operations. Various options for connections are available.

E. CONNECTION

It is vital that an Internet connection is established once in country. Due to the conditions, this may be a difficult task. The following section will assist in identifying the capability of various transmission mediums.

⁵² Beach Audio - Kanguru Solutions Aes-kmd-2g Kanguru Micro Drive, 2gbhttp://www.beachaudio.com/product_info.php?products_id=27253&GCID=C12585x003>KW=aes-kmd-2g&ref=true, 8/6/2005

	Internet Connection Speed			
Data	56K	256K	512K	1.54M
Stream	Connection	Connection	Connection	Connection
1 Mb	4.16 min	.54 Min	.27 min	.09 min
5 Mb	20.8 min	2.73 min	1.37 min	.45 min
10 Mb	41.6 min	5.45 min	2.73 min	.91 min
20 Mb	1 hr 23 min	10.9 min	5.45 min	1.82 min
50 Mb	3 hr 46 min	27.25 min	13.63 min	4.54 min
100 Mb	7 hr 32 min	54.5 min	27.25 min	9.08 min

Table 9. Transmission Downloads Time⁵³

1. 56kbps Modem

Though the chance of a telephone infrastructure existing in remote locations is unlikely (especially immediately following a disaster), telemedicine can perform some limited operations with a 56k modem. 56k modems are sensitive to phone line conditions both inside your house and outside on the telephone company's network.

A computer is a digital machine, while telephone lines are analog, transmitting data by sound. Modems work by taking a digital signal and transforming it into analog (sound) over a phone line. In order to achieve connections higher than 33.6Kbps, modem companies have invented a technology to use to their advantage the all digital connectivity between the server modems and the Public Switch Telephone Network (PSTN). A 56k modem connection is only one way; 33.6Kbps is still the limit for the upload rates because of the additional analog to digital conversion.

The fact is that the telephone system is designed to host voice phone calls which require far less quality than a data connection requires. Therefore, in some countries with

⁵³ Small Business Connection, http://www.connected.com/support/FAQs_smb/FAQs_smb_connections.asp, 8/4/2005

old telephone systems, to upgrade their equipment you may have equipment that will not support 56kbps quality connections very well or even at all.

2. DSL

Digital Subscriber Line (DSL) is a technology for bringing high-bandwidth information to homes and small businesses over ordinary copper telephone lines. xDSL refers to different variations of DSL, such as ADSL, HDSL, and RADSL. Assuming your home or small business is close enough to a telephone company central office that offers DSL service, you may be able to receive data at rates up to 6.1 megabits (millions of bits) per second (of a theoretical 8.448 megabits per second), enabling continuous transmission of motion video, audio, and even 3-D effects. More typically, individual connections will provide from 1.544Mbps to 512Kbps downstream and about 128Kbps upstream. A DSL line can carry both data and voice signals and the data part of the line is continuously connected.

3. Cable Modem

A cable modem is a device that enables you to hook up your PC to a local cable TV line and receive data at 1.5Mbps or more. This data rate far exceeds that of the prevalent 28.8 and 56Kbps telephone modems and the 128Kbps speed of Integrated Services Digital Network (ISDN) and is nearly equal to the data rate available to subscribers of Digital Subscriber Line (DSL) telephone service. The actual bandwidth for Internet service over a cable TV line is up to 27Mbps on the download path to the subscriber with about 2.5Mbps of bandwidth for interactive responses in the other direction.

4. Satellite Connection

A satellite Internet connection is an arrangement in which the upstream (outgoing) and the downstream (incoming) data are sent from, and arrive at, a computer through a satellite. Each subscriber's hardware includes a satellite dish antenna and a transceiver (transmitter/receiver) that operates in the microwave portion of the radio spectrum.

In a two-way satellite Internet connection, the upstream data is usually sent at a slower speed than the downstream data arrives. Thus, the connection is asymmetric. Uplink speeds are nominally 50 to 150 Kbps for a subscriber using a single computer.

The downlink occurs at speeds ranging from about 150Kbps to more than 1200Kbps, depending on factors such as Internet traffic, the capacity of the server, and the sizes of downloaded files.

Acquiring a satellite connection can be an expensive venture. The price of the satellite equipment can cost almost \$3,000 and the monthly service can cost over \$20,000 (see appendix B). Some remote areas of the world do not have a communication infrastructure and a 56K modem connection may be hard to acquire. One alternate solution is try to find someone in the area that is already subscribing to satellite based Internet service and try to share the bandwidth and the cost. If there is a communication infrastructure, see what types of services are available.

F. TRAINING

Given the technological intricacy of telemedicine systems, suitable training of all personnel concerning the use and technical support of your telemedicine system is necessary for program success. With all technical applications, repetitive training to reinforce familiarity and to maintain skill level is recommended. In designing the training program, consider the following factors which affect training requirements:

- The number of potential employees participating in the telemedicine program
- The equipment they are expected to use
- Services to be performed
- The anticipated annual employee turnover rate
- The availability of ongoing in-house technical support
- Quality assurance requirements

Each of these factors will help shape the type of training required. With that said, training should be performed no less than annually. All new employees should be required to go through an indoctrination program that covers all major training. The output and competence of employees will increase considerably with an investment in a successful training program.

VIII. CONCLUSION AND FOLLOW-ON RESEARCH

A. CONCLUSION

Researching and choosing technologies that will function with the FLAK to support HA/DR is a dynamic topic, but this paper has only touched the surface. The next necessary step is long term deployment of 30, 60, 90 or 180 days to identify the technology's weaknesses and strengths. Studying this topic in a controlled setting or in a deployed setting for 1-2 weeks will never fully identify capabilities or faults. Some areas in need of research are highly technical, but many non-technical processes would benefit from this research as well.

There is currently no deployable stand-alone medical technology. All of the current technologies require some level of medical proficiency to use, whether by a medic, nurse, physician assistant or physician. Also, this technology can be complex and is being deployed to environments that are not kind to the equipment. Until long-term research can be performed with constant monitoring and use, the real capabilities will not be known. In addition to medical personnel being assigned to the deployment team, there is also a need for technical personnel to set up, maintain and troubleshoot the equipment. Though this thesis has demonstrated that there is a cost savings when compared with MEDEVACS and telemedicine, it remains uncertain if the employment and deployment of technical and medical personnel can be supported, or accepted. Is this money better spent in other areas?

Some of the areas that require further research and analysis are as follows:

B. HEALTHCARE INFORMATION TECHNOLOGY IN THE FIELD

Identifying medical components to function in concert with a Fly-Away-Kit is not an easy task. Identifying those strengths and weaknesses without a full deployment is challenging. This research evaluated different scenarios where technology could support different medical operations in isolated locations and serve as a baseline for medical operations in remote locations where medical IT systems had little or no use in the past. As stated earlier, in the U.S. healthcare system only 17 percent of doctors' offices check electronic records prior to treating patients or prescribing medicine and only 8 percent of

physicians use a computerized physician order entry system. It is a major undertaking to convince doctors in the field to practice what their colleagues in air-conditioned sterile environments are hesitant to do. It is vital to start small and show benefits before a large scale deployment is attempted.

The author has made an argument for the use of an EMR in cooperation with a telemedicine suite to assist medical humanitarian organizations with their operations. With the average cost of a MEDEVAC costing over \$10,000, the initial startup cost of a telemedicine suite pales in comparison. Additionally, with the increase in air ambulance crashes, it is clear that the cost of medical IT is much lower than the dangers and costs of losing staff members' or patients' lives. One other concern not addressed in this thesis is the ability of small humanitarian organizations to be cut off from their larger counterparts due to the inability to deploy such technologies. Protocols will need to be developed to ensure continuity of care whether the care is performed by a small or large NGO.

C. TECHNOLOGY SUPPORT

Some of the lessons learned from NPS's tsunami relief efforts in Thailand can be applied to almost any future humanitarian medical mission. Though the area of Thailand is not representative of the entire globe, it does show that the climate can wreak havoc on technology. Additionally, a humanitarian organization can not expect every country to welcome humanitarian aid with open arms in the manner that the Thai government did after the tsunami. The maintenance of the equipment and applications is a question that remains to be answered. Due to the lack of models of organizations currently deploying such technology on large scales, the author has proposed the employment of technology support to deploy with the teams. Technology support personnel can ensure uptime and can also be responsible for the maintenance, setup and deployment of information technology. This can represent an enormous cost and ties to the concern that smaller NGOs may get left out.

D. INTEROPERABILITY

The author has gone to great length to address interoperability issues. Employment of worldwide standards will ensure that all systems are able to pass information to those that need it. If the medical information cannot be shared, then the service is useless, due to the fact that medical information can take many forms. Though

these recommendations are made, there is no guarantee that the organizations will follow them or decide that software that has enabled these standards is too expensive. The result will be stovepipe systems. It is imperative for success that humanitarian organizations avoid the temptation and incorporate systems with standards similar to HL7 and DICOM.

E. COMMUNICATIONS

Who will acquire communication solutions such as SATCOM is a question that can only be answered as the requirement is developed. In this day and age, SATCOMs are extremely expensive and differ from country to country. This may be the biggest unknown when the team leaves for their destination. Satellites are a good communication platform but are expensive, and many of the promising emerging technologies in this area are untested. Further research should consider additional connectivity options and cooperation with other organizations to maximize benefits, mitigate problems with IP over satellites, and test solutions.

F. HIPAA AND SECURITY

The applicability of HIPAA will always remain a question mark. Whether NGOs will decide to implement HIPAA or some international standard remains to be seen. With the lack of implementation of IT in humanitarian medical missions, there may be some that argue that there is not a need for an international standard to regulate the use of IT in humanitarian missions. As the application of IT in such missions becomes more widespread, the time to develop a standard may have already passed. The United Nations should lead this effort and establish a set of standards to globally protect patient's information. Furthermore, HIPAA would not have the impact it does in the U.S. if it did not have the ability to impose fines up to \$250,000 and ten years in prison. The U.N. would need to consider some mechanism of enforcement to guarantee compliance with the standard, but this raises concerns about where the fine will be paid, government corruption, countries that decide not to participate in the enforcement, countries that do not belong to the U.N., etc. Information security is a broad subject requiring in-depth research. For any medical suite to be used in the field, a layered defense will be needed.

G. EQUIPMENT

Commercial airlines are increasingly lowering the weight allowed for check-in baggage. Capt Lancaster's FLAK is approximately one hundred pounds, but this does

include network cables, power cords, a power source, handheld devices, and other required equipment. The combined equipment weight requirement could quickly climb to over two hundred pounds. Once the equipment arrives in country, there is the concern of whether it will pass through Host Nation Customs and how long it will take. These questions may only be answered after several deployments.

Once again, the next step for this research is field experimentation. Even the conditions found at the NPS test site on Fort Ord, California do not adequately replicate real-life parameters. The weather in Monterey is stable and cannot double for desert, tropical environments, the artic, etc. Cooperation between an NGO and NPS to deploy and test the research in field conditions would likely yield significant results.

LIST OF REFERENCES

- A Quick Guide to SSL Certificates. http://www.ecdir.com/ECGuides/ECguide3.php, 8/29/05.
- Broverman, C. A. (1999). Standards for Clinical Decision Support Systems. Journal of Healthcare Information Management. 13 (2), 23-31.
- Center for Information Technology Leadership. Healthcare Information Exchange and Interoperability (HIEI). Retrieved from www.citl.org/research/HIEI.htm, August 3, 2005.
- Chan, W., Centiu, C., & Morris, J. A. (1999). Uniform Data Standards for Capturing Patient Medical Record Information at the Point of Care. Journal of Healthcare Information Management, 13 (3), 85-95.
- Cisco Systems. Introduction to Secure Socket Layer. Accessed from http://www.cisco.com/warp/public/cc/so/neso/cxne/cxdimng/wpsot_wp.pdf, 8/29/05.
- Coe, Kathleen. Employee Awareness: The Missing Link. Accessed from http://www.computerworld.com/printthis/2005/0,4814,101990,00.html, 8/29/05.
- Doctors Without Borders Raises Concerns about U.S. Air Drops, Rejects the Link Between Humanitarian and Military Actions. http://www.mindfully.org/Reform/Humanitarian-Military-MSF.htm
- Fisk, Sherryl. Telemedicine lecture notes, University of Illinois, Springfield, November 1997. Retrieved from http://www.quasar.org/21698/textfodder/Telemedicine.html, August 3, 2005.
- From the Frontlines: Mobile Healthcare Case Study, http://www.tatrc.org/, 8/4/2005 HANDHELD BUYING GUIDE, http://www.mdtool.com/palmguide.html, 8/4/2005
- Health Level Seven, Inc. What is HL7? Retrieved from http://www.hl7.org/, August 3, 2005.
- HIPAA Basics: Medical Privacy in the Electronic Age. Accessed from http://www.privacyrights.org/fs/fs8a-hipaa.htm, 8/29/05.
- http://www.beachaudio.com/product_info.php?products_id=27253&GCID=C12585x003 >KW=aes-kmd-2g&ref=true
- Interoperability. Retrieved from http://www.himssehrva.org/docs/EHRVAExpandedPositionStatementfinal042905.pdf, 8/3/05.
- Is Your Telehealth Network Secure? Accessed from http://tie.telemed.org/articles/article.asp?path=telemed101&article=securenetwork_ef tpr03.xml, 8/29/05.
- Itronix Q200, http://www.itronix.com/products/handhelds/q200.asp, 8/4/2005

- Joint Publication (JP) 3-07.6, Joint Tactics, Techniques, and Procedures for Foreign Humanitarian Assistance. Washington, DC: Government Printing Office (GPO), 15 August 2001, vii.
- Joint Task Force (JTF) Commander's Handbook for Peace Operations. Fort Monroe, VA: Joint Warfighting Center; 16 June 1997, 11-12.
- Lancaster, David D., Developing A Fly-Away-Kit (Flak) To Support Hastily Formed Networks (Hfn) For Humanitarian Assistance And Disaster Relief (HA/DR, 6/05
- Mazu Insider Threat Report. Accessed from http://www.mazunetworks.com/news/threat_report/, 8/29/05.
- Medical Informatics in Emergency Medicine. Accessed from http://www.emedicine.com/emerg/topic879.htm#target1, 8/29/05.
- National Center for Health Statistics. New Study Shows Limited Use of Electronic Medical Records. Press release, March 15, 2005. Retrieved from http://www.cdc.gov/nchs/pressroom/05news/medicalrecords.htm, August 2, 2005.
- National Center for Health Statistics. Use of Computerized Clinical Support Systems in Medical Settings: United States, 2001–03. Advance Data Number 353, March 15, 2005. (PHS) 2005-1250. Retrieved from http://www.cdc.gov/nchs/data/ad/ad353.pdf, August 2, 2005.
- Natsios, Andrew S. U.S. Foreign Policy and the Four Horsemen of the Apocalypse: Humanitarian Assistance in Complex Emergencies. Westport, CT: Praeger, 1997.
- Priest, Dana. The Mission: Waging War and Keeping Peace with America's Military. New York: W.W. Norton, 2003, 19.
- Randolph, Leonard M. Jr. and Cogdell, Matthew W. Medical Dimensions of Joint Humanitarian Relief Operations. Accessed August 6, 2005 from http://www.dtic.mil/doctrine/jel/jfq_pubs/jq019617.pdf.
- Risk Assessment and Threat Identification. Accessed from http://www.windowsecurity.com/articles/Risk_Assessment_and_Threat_Identification.html, 8/29/05.
- Rogers, J. (Director of Patient Care Systems). (1999, December). [Interview]. St. Jude Children's Research Hospital, 332 N. Lauderdale, Memphis, TN 38105.
- Rogers, J. (Director of Patient Care Systems). (1999, October). [Interview]. St. Jude Children's Research Hospital, 332 N. Lauderdale, Memphis, TN 38105.
- Small Business Connection, http://www.connected.com/support/FAQs_smb/FAQs_smb_connections.asp, 8/4/2005
- St. Jude Children's Research Hospital. (1998, January). Milli Project Scope Document (Document No. unknown). Memphis: No Author.
- Teich, J. M. (1999). Inpatient Order Management. Journal of Healthcare Information Management, 13 (2), 97-110.

- The Sphere Project: Humanitarian Charter and Minimum Standards in Disaster Response. Oxford, UK: Oxfam Publishing, 2000, 313.
- U.S. Agency for International Development (USAID), Bureau for Humanitarian Response (BHR); Office of Foreign Disaster Assistance (OFDA). Field Operations Guide for Disaster Assessment and Response. Washington, DC: August 1998, xix. Accessed August 6, 2005 from www.info.usaid.gov/ofda.
- United Nations General Guidance for Interaction between United Nations Personnel and Military Actors in the Context of the Crisis in Iraq, 21 March 2003. Accessed from UN Relief Web, www.reliefweb.int/w/rwb.nsf/UNID/D1791CAE88 50F70585256CF60070DBD0.
- United Nations Guidelines on the Use of Military and Civilian Defence Assets to Support UN Humanitarian Activities in Complex Emergencies, 20 March, 2003. Accessed from UN Relief Web, www.reliefweb.int/w/rwb.nsf/UNID/8A4E48712A846DEC1256CF 000394E45.
- VPN Split Tunneling Diagram. Accessed from http://uwadmnweb.uwyo.edu/InfoTech/vpn/images/split_tunnel.gif, 8/29/05.
- Weil, Steven. HIPAA Security Rule. Accessed from http://www.securityfocus.com/infocus/1764, 8/29/05.
- Woodward, John D. Jr., Esq. and Roethenbaugh, Gary. Fact Sheet on the European Union Privacy Directive. Accessed from http://www.dss.state.ct.us/digital/eupriv.html, 8/29/05.

THIS PAGE INTENTIONALLY LEFT BLANK

APPENDIX A. LICENSURE AND CERTIFICATION

NATIONAL DATABASES

- <u>ABMS Verification Service</u> (board certification for physicians)
- <u>AMA Physician Select</u> (All licensed medical and osteopathic physicians, but you must specify state in which the doctor practices)
- <u>ChoicePoint Doctor Search</u> (Free search by state, \$9.95 for disciplinary details)
- HealthGrades maintains a searchable database of medical and osteopathic physicians. Its reports cover education and training; specialties; board certification; disciplinary actions and several other characteristics. Searching, which costs \$7.95 for the first search and \$2.95 for each additional search, requires the physician's last name and state of practice. The resultant information includes whether the doctor has been sanctioned within the past few years, but no details are provided. People seeking a new doctor in their own community can get a report that compares up to 20 of them for \$9.95. Reports are also available for hospitals and nursing homes.
- <u>Joint Commission on Accreditation of Health Care Organizations</u>: Accreditation directory
- <u>OIG Exclusions Database</u>: (individuals/entities excluded from federally funded health-care programs)
- <u>Public Citizen</u> (Free lists of physicians sanctioned by 19 states. Details cost \$10 for 10 individual reports)

STATE DATABASES

MEDICAL DOCTORS	OSTEOPATHIC DOCTORS
Alabama State Board of Medical Examiners	
Alaska State Medical Board	
Arizona Medical Board	
Arkansas State Medical Board	
Medical Board of California	Osteopathic Medical Board of California
Colorado Board of Medical Examiners	
Connecticut Medical Examining Board	
Delaware Board of Medical Practice	

MEDICAL DOCTORS	OSTEOPATHIC DOCTORS
District of Columbia Board of Medicine	
Florida Board of Medicine	
Georgia Composite State Board of Medical Examiners	
Hawaii Board of Medical Examiners	
Idaho State Board of Medicine	
Illinois Department of Professional Regulation	
Medical Licensing Board of Indiana	
Iowa State Board of Medical Examiners	
Kansas Board of Healing Arts	
Kentucky Board of Medical Licensure	
Louisiana State Board of Medical Examiners	
Maine Board of Licensure in Medicine	Maine Board of Osteopathic Licensure
Maryland Board of Physician Quality Assurance	
Massachusetts Board of Registration in Medicine	
Michigan Board of Medicine	Michigan Board of Osteopathic Medicine and Surgery
Minnesota Board of Medical Practice	
Mississippi State Board of Medical Licensure	
Missouri State Board of Registration for the Healing Arts	
Montana Board of Medical Examiners	
Nebraska Board of Medicine and Surgery	
Nevada State Board of Medical Examiners	Nevada State Board of Osteopathic Medicine
New Hampshire Board of Medicine	

MEDICAL DOCTORS	OSTEOPATHIC DOCTORS
New Jersey State Board of Medical Examiners	
New Mexico State Board of Medical Examiners	New Mexico Board of Osteopathic Medical Examiners
New York State Board for Professional Medical Conduct	
North Carolina Medical Board	
North Dakota State Board of Medical Examiners	
State Medical Board of Ohio	
Oklahoma State Board of Medical Licensure and Supervision	Oklahoma State Board of Osteopathic Examiners
Oregon Board of Medical Examiners	
Pennsylvania State Board of Medicine	Pennsylvania State Board of Osteopathic Medicine
Rhode Island Board of Medical Licensure and Discipline	
South Carolina Board of Medical Examiners	
South Dakota State Board of Medical and Osteopathic Examiners	
Tennessee Board of Medicine	Tennessee Board of Osteopathic Examiners
Texas State Board of Medical Examiners	
<u>Utah Department of Commerce</u>	Board of Osteopathic Medicine
Vermont Board of Medical Practice	Vermont Board of Osteopathic Physicians and Surgeons
Virginia Board of Medicine	
Washington Medical Quality Assurance Commission	Washington State Board of Osteopathic Medicine and Surgery
West Virginia Board of Medicine	West Virginia Board of Osteopathy
Wisconsin Medical Examining Board	
Wyoming Board of Medicine	

MISCELLANEOUS DATABASES

<u>Federation of State Medical Boards</u> - http://www.fsmb.org National Association of Boards of Pharmacy - http://www.nabp.net

National Board of Medical Examiners – http://www.nbme.org

National Board of Osteopathic Medical Examiners, Inc. – http://www.nbome.org

National Council of State Boards of Nursing – http://www.ncsbn.org

Nurse Licensure Compact – http://www.ncsbn.org/nlc/

Source: http://www.ihealthpilot.org/research/lookup.shtml, 8/3/05

APPENDIX B. RETAIL PRICING AND TECHNICAL INFORMATION

Bentley Walker LTD

RETAIL PRICING AND TECHNICAL INFORMATION

30/07/04

All prices are minus VAT where applicable



HARDWARE COSTS

Complete system with 1.2 M Dish \$1812.50

Complete system with 1.8 M Dish \$2812.50

Prices include dish, mount, arms, head unit, Star Pro system. Cable and connectors are supplied at an extra cost

HOME SUBSCRIPTION

HOME 1000

128Kbits up - 1024KBitsDOWN

SAR – 20:1 5 Private IPs

MONTHLY QUARTERLY

€305.00 €915.00

\$336.00 \$1007.00

BUSINESS SUBSCRIPTIONS

ALL SAR 10:1 - All come with 13 Private IPs

OFFICE 500

128Kbits UP - 512Kbits DOWN

MONTHLY QUARTERLY

€328.00 €984.00

\$362.00 \$1083.00

OFFICE 500 PREMIUM

512Kbits UP – 512Kbits DOWN

MONTHLY QUARTERLY

€489.00 €146400

\$539.00 \$1614.00

ALL SAR 10:1 - All come with 29 Private IPs

OFFICE 1000

128KBits UP - 1024Kbits DOWN

MONTHLY QUARTERLY

€547.00 €1639.00

\$602.00 \$1803.00

OFFICE 500+

256Kbits UP - 512Kbits DOWN

MONTHLY QUARTERLY

€403.00 €1208.00

\$443.00 \$1329.00

OFFICE 1000+

OFFICE 1000 PREMIUM

256Kbits UP – 1024Kbits DOWN

512Kbits UP - 1024Kbits DOWN

MONTHLY QUARTERLY €748.00 €2243.00

\$2467.0

€ 863.00 €2588.00 \$948.00 \$2847.00

MONTHLY QUARTERLY

OFFICE 2000

\$823.00

OFFICE 2000+

128Kbits UP – 2048Kbits DOWN

256KBits UP - 2048KBits DOWN

 MONTHLY
 QUARTERLY
 MONTHLY
 QUARTERLY

 €978.00
 €2933.00
 €1030.00
 €3088.00

 \$1076.00
 €3226.00.
 \$1133.00
 \$3398.00

OFFICE 2000 PREMIUM

512Kbps UP – 2048Kbps DOWN SAR 10:1

MONTHLY QUARTERLY €1208.00 €3623.00 \$1328.00 \$3985.00

OFFICE 4000 +

OFFICE 4000 PREMIUM

256 Kbits UP – 4096 Kbits DOWN 512Kbits UP – 4096 DOWN MONTHLY QUARTERLY MONTHLY QUARTERLY €1714.00 €5141.00 €1850.00 €5548.00 \$2127.00 \$6385.00 \$2295.00 \$6883.00

OFFICE 4000 PREMIUM +

1024 Kbits UP - 4096 Kbits DOWN

MONTHLY QUARTERLY €2040.00 €5319.00 \$2531.00 \$7591.00

NB Please see our Grade of Service Document for accurate performance levels on all subscription packages

Broadband Satellite IP Networking Terminal

Star Pro is a scalable, high performance satellite IP terminal that delivers broadband access with a high-speed return channel. Global Service Providers, ISP's, and corporations require efficient, broadband IP networking solutions to satisfy bandwidth-intensive applications such

As Internet access, digital media streaming, video-conferencing, distance education, file transfer, multi casting, and virtual private networks. Star Pro is the ideal, low cost solution for these and many other IP-based services.

Star Pro has been developed under a unique combination of skills in data networking, digital communications, satellite access, and network management, to provide a low cost, scalable next generation satellite networking product.

Star Pro receives a broadband DVB outbound channel to 60 Mbps and provides a broadband satellite return channel with speeds up to 1.150 Mbps. The F-TDMA broadband return channel provides efficient broadband on demand and has DVB-RCS compliant turbo coding for enhanced throughput performance.

Star Pro supports IP routing, IP multicasting, IP Quality of Service, and TCP spoofing for 10 Mbps of unicast throughput. Star Pro's Web-based NMS is simple to operate, easy to configure, provides traffic statistics and call details detail records, and offers an SNMP interface.

EXTRAS

UD Router and Acceleration Unit €995.00

Plus €150.00 support package this includes all software/hardware upgrades for the first year

VPN version router and local bandwidth manager unit €1995.00

Plus €300.00 Support package this includes all software/hardware upgrades for first year

Satellite Dish Trolley	£ 350.00	\$ 582.00	€ 493.50
Satellite Meter	£ 260.00	\$ 475.00	
Dual Shot Cable	£ 1.60	\$ 3.00	€ 2.49
Fixing Bracket	£ 65.00	\$	€

DEDICATED BAND WIDTH

W1 & W3 STAR PRO ONLY*

COSTS PER MONTH AS AT 17/02/04

PLEASE NOTE NO FREE MONTHS ON DEDICATED

UPLOAD IN KILOBITS

\$672.00

\$1274.00

256 \$2422.00

512 \$4625.00

DOWNLOAD IN KILOBITS

\$835.00

\$1589.00

\$3037.00

\$5784.00

\$8674.00

1 MB \$11011.00

2 MB \$21584.00

^{*} Dedicated bandwidth options are available on PAS1R and NSS6, please ask for further details.

CABLE REQUIREMENTS

STAR PRO

RG6 EQUIVALENT TO CT 100

TWIN SHOT CABLE (UP TO 30M RUN)

Per metre £1.60 - \$2.75 - €2.49 a minimum run of 30m is necessary.

We cut the cable to this length and fit Snap on connectors at a cost of:

£58.00 - \$105.00 - €85.00

RUNS IN EXCESS OF 30 METRES

RG11 EQUIVALENT TO WF165 SINGLE CABLE TWO RUNS REQUIRED

Customers will either have to specify length required and we will fit the plugs, or purchase the Snap and Seal Tool as a cost of:

£44.00 - \$79.00 - €66.00

Connectors for set of 4 required £14.00 - \$25.20 - €20.80

RG11 PER 250 METRE ROLL £224.00 - \$400.00 - €332.00 RG6 PER 250 METRE ROLL £280.00 - \$500.00 - €415.00

APPENDIX C. WINDOWS CE AND POCKET PC SOFTWARE TO DOWNLOAD

pocketpcsoft.net Windows CE and Pocket PC Software to download

http://www.ipaqsoft.net/php/ppcresults.php?type=m

Name	Description	Cost	Date Added
HemHdbk™ 6th Ed.	A portable, quick-reference guide with clinical information on over 100 hematologic	\$44.95	2005-07-29
	diseases and their management.		
Mosbys Medical Drug Reference 2004	A trusted pharmacological reference resource for primary care physicians and allied healthcare personnel.	\$39.95	2005-07-29
EssentialSur	A-Z listing of 400 common or important surgical disorders and syndromes.	\$39.95	2005-07-09
Patient Tracker Desktop (LITE)	Patient Tracker Desktop is a robust, point-of-care charting application designed for clinicians who operate in small outpatient clinics and offices.	\$299.0 0	2005-07-06
ОНСМ6тм	Covers all areas of internal medicine and provides rapid, on-the-spot access to evidence-based clinical management.	\$39.95	2005-07-06
WUCID™	This handy consult reference covers the full spectrum of infectious disease problems.	\$39.95	2005-07-06
MeasureUP: Growth Percentile, BMI more	Track kids growth pattern by calculating and recording Growth Percentiles, Body Mess Index (BMI) and projected adult height. Export to MS excel.	\$9.95	2005-06-27
NEW! - Anesthesia Central	A premier collection of disease, drug, test, procedure, and literature information for anesthesiologists, critical care specialists, nurse anesthetists, and trainees.	\$149.9 5	2005-06-16
PEPID RN CC Critical Care Nursing Suite	PEPID RN CC is the only all inclusive electronic resource designed for critical care nurses. PEPID RN CC contains all the	\$139.9 5	2005-06-09

Name	Description	Cost	Date Added
	content of PEPID RN, plus		
	extensive critical care		
	information.		
PEPID RN CC Critical	PEPID RN CC is the only all	\$139.9	2005-06-09
Care Nursing Suite	inclusive electronic resource	5	
	designed for critical care nurses.		
	PEPID RN CC contains all the		
	content of PEPID RN, plus		
	extensive critical care		
D 11	information.	¢44.05	2005 05 10
<u>PsychIx</u>	A bestselling guide to the	\$44.95	2005-05-19
	understanding of drug interactions.		
Handy nationts desirtan		freewar	2005-05-19
Handy patients desktop edition	Handy patients is a powerful and professional patient tracker for	e	2003-03-19
Cartion	PocketPC, TabletPC and		
	DesktopPC		
PsychTx TM	Contains Quick Reference	\$39.95	2005-05-19
1 by cirri	Guides (QRGs) to all of the	φ59.50	2002 02 19
	published APA Practice		
	Guidelines.		
MyPersonalDiet	Manage your weight, fitness and	\$19.95	2005-05-07
	health by defining, tracking and		
	monitoring your own diet and		
	nutrients that matter to you.		
Portable NoteCard	Study 3x5 note card, vocab,	\$2.99	2005-05-07
Standard (Flash Card)	definition, or question on Pocket		
	PC.		
<u>Harrisons16</u>	Referenced to the world's best-	\$59.95	2005-05-07
	selling internal medicine		
	textbook, this handy reference		
	provides on-the-spot answers to		
Estal Diomentury	the problems you face daily.	¢14.00	2005 05 02
<u>Fetal Biometry</u>	A professional tool that	\$14.99	2005-05-03
	calculates fetalgrowth by ultrasound measurements. Shows		
	graphically the results related to		
	the standarddevelopment.		
Wound & Skin Infections	A medical reference text with	\$7.95	2005-05-03
2006	detailed step-by-step procedures,	Ψ,.,,	2002 02 03
	work-ups and treatments.		
MosbyDrugs5	Provides convenient, take-	\$49.95	2005-05-03
	anywhere access to current,		
	unbiased, accurate, and reliable		
	drug information and		

Name	Description	Cost	Date Added
	interactions.		
Clinical Infectious Diseases 2006	A medical reference text with detailed step-by-step procedures, work-ups and treatments.	\$14.95	2005-05-03
Harrisons Manual 16th ed.	The worlds best-selling internal medicine content now available for PDA, Web, Wireless on Unbound Medicines award-winning platform! NEW Edition!	\$59.95	2005-04-15
Dx/Rx: Valvular Heart Disease	Precise, up-to-date information for diagnosis and treatment of Valvular Heart Disease.	\$34.95	2005-04-15
Dx/Rx: Coronary Thrombosis	Details precise, up-to-date information for diagnosis and treatment of Coronary Thrombosis.	\$34.95	2005-04-15
MeasureUP: Track kids growth pattern	Pocket PC application to track kids growth pattern by calculating and recording Growth Percentiles, Body Mess Index (BMI) and projected adult height, with MS excel export capability.	\$9.95	2005-04-15
Patient Tracker 5.2 for Pocket PC	Patient Tracker allows mobile access to patient records including patient demographics, laboratory results, medication/allergy lists, test results, and radiology reports.	\$9.95	2005-04-15
IVDH8 TM	Crucial details that make safe and effective administration of I.V. drugs possible are now just one tap away!	\$41.95	2005-04-15
Griffiths 5 Minute Clinical Consult	Whether you need to confirm critical diagnostic criteria before initiating treatment, or are trying to choose the best medical or surgical approach for a particular patient	\$64.95	2005-04-15
Current Consult: Surgery	Brings you authoritative clinical answers on more than 360 surgically treated disorders in the most efficient format.	\$69.95	2005-04-07
Tabers20 TM	For more than 65 years, Tabers	\$49.95	2005-03-31

Name	Description	Cost	Date Added
	has provided students and		
	practitioners with the definitions		
	and information they need to		
	provide superior care for their		
	patients.		
Daviss Drug Guide for	This drug reference remarkably	\$49.99	2005-03-31
<u>Physicians</u>	contains the entire content of the		
	Davis's Drug Guide (9th		
	Edition), including integrated		
	calculators by Medical Wizards		
RadRevMnl TM	The #1 radiology board	\$99.00	2005-03-31
	reviewthe Green Bookis now		
	available in PDA format!		
OncoMD05 TM	Completely revised and updated	\$75.95	2005-03-31
	for 2005, this practical handbook		
	is an up-to-date guide to all		
	aspects of cancer chemotherapy.		
NatMed05 TM	Natural Medicines	\$92.00	2005-03-31
	Comprehensive Database 2005	47 = 100	
	gives you everything you want		
	to know about herbs, vitamins,		
	minerals, supplements.		
Harrisons Manual of	Best Medical Application 2004	\$59.95	2005-03-31
Medicine Medicine	finalist! The worlds best-selling	Ψυν.νυ	2003 03 31
<u>ividatomo</u>	internal medicine brand		
	optimized by Unbound Medicine		
	for handheld devices. Buy now		
	and get the upcoming 16th		
	edition FREE!		
JavaPK for Window	a clinical pharmacokinetic (or	\$29.50	2005-03-31
Mobile 2003 Device	therapeutic drug monitoring.	Ψ=>.50	2000 00 01
1.100110 2000 201100	TDM) tool for Window Mobile		
	2003 Device		
Physi-Calc	Physi-Calc delivers patient-	\$24.95	2005-03-31
	specific, best-practice treatment	Ψ= 1.75	
	information at point of care		
	without disrupting workflow.		
Clinical Hematology-	A medical reference text with	\$11.95	2005-03-31
Oncology 2006	detailed step-by-step procedures,	Ψ11./	2000 00-01
Oncology 2000	work-ups, treatment plans,		
	medicines and differentials for a		
	myriad of medical conditions.		
MeasureUP	Pocket PC tool to calculate and	\$8.50	2005-03-31
<u>ivicasurcor</u>	record Growth Percentiles and	φο.50	2003-03-31
	Body Mess Index (BMI)		

STDL Biorhythms STDL Biorhythms helps you to calculate your biorhythms. This is a small, convenient and original tool for PocketPC. PEPID RN Student The only "all-in-one" fully integrated medical reference software for nurses in all settings. PEPID RN Student Clinical Companion The only "all-in-one" fully integrated medical reference software for nurses in all settings. PEPID RN Student The only "all-in-one" fully integrated medical reference software for nurses in all settings. NCLEX-RN®, 8th Ed. The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format. Simply check the checkboxes S12.95 2005-03-03-06 S29.99 C005-03-06 C		Description	Cost	Date Added
is a small, convenient and original tool for PocketPC. PEPID RN Student Clinical Companion PEPID RN Student Clinical Companion PEPID RN Student Clinical Companion The only "all-in-one" fully integrated medical reference software for nurses in all settings. PEPID RN Student Clinical Companion The only "all-in-one" fully integrated medical reference software for nurses in all settings. NCLEX-RN®, 8th Ed. The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Dx/Rx: Heart Failure Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.	STDL Biorhythms		\$12.95	2005-03-31
original tool for PocketPC. PEPID RN Student Clinical Companion Clinical Companion PEPID RN Student Clinical Companion The only "all-in-one" fully integrated medical reference software for nurses in all settings. PEPID RN Student Clinical Companion The only "all-in-one" fully integrated medical reference software for nurses in all settings. NCLEX-RN®, 8th Ed. The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.				
PEPID RN Student Clinical CompanionThe only "all-in-one" fully integrated medical reference software for nurses in all settings.\$119.9 52005-03-31PEPID RN Student Clinical CompanionThe only "all-in-one" fully integrated medical reference software for nurses in all settings.\$119.9 52005-03-31NCLEX-RN®, 8th Ed.The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam.\$39.95 2005-03-312005-03-31Dx/Rx: Heart FailureUp-to-date information for diagnosis and treatment of Heart Failure.\$34.95 2005-03-312005-03-31Psychiatric DiagnsosisYou can quickly diagnose Major Psychiatric Disorders with a question and answer format.\$29.99 2005-03-06		· · · · · · · · · · · · · · · · · · ·		
Clinical Companionintegrated medical reference software for nurses in all settings.5PEPID RN Student Clinical CompanionThe only "all-in-one" fully integrated medical reference software for nurses in all settings.\$119.9 52005-03-31NCLEX-RN®, 8th Ed.The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam.\$39.95 2005-03-31Dx/Rx: Heart FailureUp-to-date information for diagnosis and treatment of Heart Failure.\$34.95 2005-03-36Psychiatric DiagnsosisYou can quickly diagnose Major Psychiatric Disorders with a question and answer format.\$29.99 2005-03-06		ŭ		
software for nurses in all settings. PEPID RN Student Clinical Companion integrated medical reference software for nurses in all settings. NCLEX-RN®, 8th Ed. The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.	PEPID RN Student	-	\$119.9	2005-03-31
Settings. The only "all-in-one" fully integrated medical reference software for nurses in all settings. Signature	Clinical Companion		5	
The only "all-in-one" fully integrated medical reference software for nurses in all settings. Say 195 Say 195				
Clinical Companionintegrated medical reference software for nurses in all settings.5NCLEX-RN®, 8th Ed.The top-selling NCLEX-RN® review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam.\$39.952005-03-31Dx/Rx: Heart FailureUp-to-date information for diagnosis and treatment of Heart Failure.\$34.952005-03-31Psychiatric DiagnsosisYou can quickly diagnose Major Psychiatric Disorders with a question and answer format.\$29.992005-03-06				
software for nurses in all settings. NCLEX-RN®, 8th Ed. The top-selling NCLEX-RN® \$39.95 2005-03-31 review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.		-		2005-03-31
Settings. Settings. Settings. The top-selling NCLEX-RN® \$39.95 2005-03-31	Clinical Companion		5	
The top-selling NCLEX-RN® \$39.95 2005-03-31 review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnosis You can quickly diagnose Major \$29.99 2005-03-06 Psychiatric Disorders with a question and answer format.				
review reflects the current NCLEX® test plan and contains more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.				
NCLEX® test plan and contains more than 5,000 total test questions-including alternate-format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.	NCLEX-RN®, 8th Ed.		\$39.95	2005-03-31
more than 5,000 total test questions-including alternate- format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.				
questions-including alternate- format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.		*		
format questions-to help students practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.		,		
practice taking the exam. Dx/Rx: Heart Failure Up-to-date information for diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.				
Dx/Rx: Heart FailureUp-to-date information for diagnosis and treatment of Heart Failure.\$34.952005-03-31Psychiatric DiagnsosisYou can quickly diagnose Major Psychiatric Disorders with a question and answer format.\$29.992005-03-06				
diagnosis and treatment of Heart Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.			***	
Failure. Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format.	Dx/Rx: Heart Failure		\$34.95	2005-03-31
Psychiatric Diagnsosis You can quickly diagnose Major Psychiatric Disorders with a question and answer format. 2005-03-06				
Psychiatric Disorders with a question and answer format.			***	
question and answer format.	Psychiatric Diagnsosis		\$29.99	2005-03-06
Simply check the checkboxes				
with positive answers and press				
buttons to follow instructions to				
a diagnosis. NEW! Unbound Surgery Comprehensive, up-to-date \$99.95 2005-03-06	NEW! Unbound Surgary	<u> </u>	\$00.05	2005-03-06
	INEW! Unbound Surgery	• •	\$77.73	2003-03-00
surgical knowledge delivered where and when you need it.		2		
Includes both Web and PDA		2		
versions!				
	Clinical Allerov &		\$8.05	2005-03-06
Immunology detailed step-by-step procedures,			ψυ. Σ	2005 05-00
work-ups and treatments.	<u>Immunology</u>	- · · · · · · · · · · · · · · · · · · ·		
	Clinical Gastroenterology		\$10.95	2005-02-19
2006 detailed step-by-step procedures,			Ψ10.75	2000 02 17
work-ups and treatments.	2000	- · · · · · · · · · · · · · · · · · · ·		
	STDL Biorhythms	1	\$14.95	2005-02-19
calculate your biorhythms. This	~		Ψ 1.70	2000 02 17
is a small, convenient and				
original tool for PocketPC.				
	Clinical Nanhrology 2006		\$9.95	2005-02-19

Name	Description	Cost	Date Added
	detailed step-by-step procedures,		
	work-ups and treatments.		
<u>WUCEndo™</u>	Ideal for residents, students and	\$39.95	2005-02-19
	specialists seeking information		
	on endocrinology and general		
	internal medicine management.		
CecilPkt22 TM	Features Information on signs	\$59.95	2005-02-15
	and symptoms, treatment		
	summaries, differential		
	diagnoses, pathophysiology and		
	clinical manifestations.		
IdentADrg5 TM	Ident-A-Drug gives you quick	\$39.50	2005-02-15
	accurate identification of oral		
	tablets and capsules used in		
	North America.	015.00	2005.02.05
Slim Soft 1.0 for Pocket	A complete Weight Loss	\$15.99	2005-02-05
<u>PC.</u>	Management System.The		
	software helps you to achieve		
	your fitness and weight loss		
	objectives by giving you the		
D 1 : M 1: :	tools necessary to manage them.	¢10.05	2005 02 05
Procedures in Medicine	A medical reference text with	\$19.95	2005-02-05
<u>2005</u>	detailed step-by-step procedures,		
	work-ups, treatment plans,		
	medicines and differentials for a		
W-:-1-4 I	myriad of medical conditions.	Φ2 Ω <i>ξ</i>	2005-01-23
Weight Loss	Weight Loss allows you to keep	\$3.95	2005-01-23
	track of your weight loss in a		
	very easy way. This is a database template for our "Database 4		
	All" product.		
Critical Care and Nutrition	An edical reference text with	\$12.95	2005-01-23
2005	detailed step-by-step procedures,	φ14.73	2003-01-23
2003	work-ups and treatments.		
Clinical Ear-Nose &	A medical reference text with	\$9.95	2005-01-23
Throat 2005	detailed step-by-step procedures,	ψ././	2003-01-23
11110ut 2003	work-ups and treatments.		
PsychD5 TM	Instant access to essential	\$49.95	2005-01-23
15,01155	information on all drugs used in	ψ12.23	2002 01 23
	current psychiatric practice.		
FerriCA05 TM	Provides the busy physician with	\$69.95	2005-01-23
	a fast, efficient way to identify	Ψ02.20	2002 01 23
	important clinical information		
	about the most commonly		
	encountered medical disorders.		
	The different medical disorders.		

Name	Description	Cost	Date Added
Clinical Endocrinology	A medical reference text with	\$10.95	2005-01-23
<u>2005</u>	detailed step-by-step procedures,		
	work-ups and treatments.	4460=	
Clinical Trauma &	A medical reference text with	\$16.95	2005-01-07
Toxicology - 2005	detailed step-by-step procedures,		
and Diagraphic TM	work-ups and treatments.	¢40.00	2005-01-07
<u>emPlasticTM</u>	Designed for use by practicing	\$49.00	2005-01-07
	physicians, academicians and residents to provide rapid		
	answers to clinical questions.		
emPsych TM (eMedicine	Designed for use by practicing	\$49.00	2005-01-07
Psychiatry)	physicians, academicians and	ψ12.00	2005 01 07
i syemany,	residents to provide rapid		
	answers to clinical questions.		
emSurg TM	Designed for use by practicing	\$49.00	2005-01-07
	physicians, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
EchoGuide TM	The perfect quick consult for the	\$89.95	2005-01-07
	busy cardiologist.		
<u>ParasitesDCTM</u>	A concise, easy to use and	\$45.00	2005-01-07
	accurate means of diagnosing		
	commonly seen parasites of dogs		
DrugTrials TM	and cats.	\$79.95	2004-12-28
Diuginais	Keep up with the latest in scientific clinical trial activity	\$19.93	2004-12-28
	and drug development using		
	market intelligence and		
	knowledge resources from		
	CenterWatch.		
Nurses Pocket Drug Guide	The Essential Drug Guide for	\$24.95	2004-12-28
<u>2005</u>	Registered Nurses and Advanced		
	Practice Nurses!		
<u>DrugStudiesTM</u>	Providing patients and their	\$19.95	2004-12-28
	advocates with a variety of		
	information services and		
	educational materials on clinical		
Clinical Evidence with	research. The international source of the	\$00.00	2004 12 29
Clinical Evidence with Auto-Updates	best available evidence for	\$99.00	2004-12-28
Auto-Opuates	effective healthcare updated		
	monthly on your PDA!		
Essentials of Dx & Tx in	The essential information needed	\$29.95	2004-12-07
Cardiology	to diagnose and manage patients	Ψ=>.>0	200.1207
	with cardiac diseases		
			<u> </u>

Name	Description	Cost	Date Added
NEW! Current Consult	Authoritative clinical answers on	\$69.95	2004-12-07
Surgery	more than 360 surgically treated		
	disorders.		
NEW! Current Consult	Integrated medical reference	\$59.95	2004-12-07
Medicine	suite covering 850+ disorders		
	linked with 550 differential		
	diagnoses. From the authors of		
	the best-selling text, CURRENT		
	Medical Diagnosis & Treatment!		
AHFS DI TM (AHFS Drug	Provides more extensive	\$79.00	2004-12-07
<u>Information</u>)	evidence-based data than any		
E CLEDITY (ATTEGRA	other drug reference.	Φ40.00	2004 12 07
Essentials DITM (AHFS DI	An evidence-based foundation	\$49.00	2004-12-07
Essentials)	for safe and effective drug		
FerriTests TM	therapy. Directs readers to the most	\$39.95	2004-12-07
remiests	efficient and cost-effective	ψ37.73	2004-12-07
	imaging and laboratory studies		
	for any diagnostic challenge.		
USMLE S3 TM (Crush Step	The market leader among all	\$29.95	2004-12-07
3, 2nd Ed.)	books for Step 3, Crush is an	Ψ29.90	2001 12 07
<u> </u>	easy-to-use and effective high		
	yield review for USMLE Step 3.		
Clinical Cardiology 2005	A medical reference text with	\$10.95	2004-12-07
	detailed step-by-step procedures,		
	work-ups and treatments.		
Pocket Guide to Diagnostic	Quick, evidence-based	\$39.95	2004-12-07
Tests, 4/e	information on the selection and		
	interpretation of more than 350		
	laboratory, imaging and		
	microbiology tests. NEW		
5 Minute Clinia 1 Control	EDITION!	06405	2004 12 07
5-Minute Clinical Consult	Best Medical Application	\$64.95	2004-12-07
(5MCC), 2005	finalist, now with Auto-Updates! Unbounds 5-Minute Clinical		
	Consult is the #1 selling 5MCC		
	on the Microsoft store!		
Lippincotts Nursing Drug	The best-selling nursing drug	\$49.95	2004-12-07
Guide 2004	reference newly updated for	ψ12.23	20011207
<u> </u>	your PDA!		
PsychoPharm TM	A quick one-stop guide to	\$39.95	2004-12-07
	prescribing psychotropic drugs		
	for patients at every stage of the		
	life span—children, adolescents,		
	adults, and the elderly.		

Name	Description	Cost	Date Added
HPND5 TM	The Fifth Edition of the popular	\$34.95	2004-12-07
	Stedmans Concise medical		
	dictionary is thoroughly updated		
	with more than 51,000 entries.		
Daviss Drug Guide with	WINNER, Best Medical	\$39.95	2004-12-07
Auto-Updates	Application 2004! Unbounds		
	Davis Drug Guide auto-updates		
	when you sync! Includes		
	features and content from the		
	new 9th print edition.	**	
MedAbbrev TM	This best-selling portable	\$29.95	2004-11-29
	resource provides authoritative		
	definitions for all of the medical		
TM TM	acronyms and abbreviations.	05405	2004 11 20
<u>VetDrugsTM</u>	Providing instant access to	\$54.95	2004-11-29
	updated information on drug		
Clinical Outhornadics 2005	therapies for most animals. A medical reference text with	\$11.95	2004-11-28
Clinical Orthopedics 2005		\$11.93	2004-11-28
	detailed step-by-step procedures, work-ups and treatments.		
StudyBuilder Professional	Database software for audit,	\$499.0	2004-11-27
Edition DE	clinical trials, registries and	0	2004-11-27
Edition DE	patient management.	U	
StudyBuilder Personal	Database software for audit,	\$149.0	2004-11-27
Edition DE	clinical trials, registries and	0	20011127
<u> </u>	patient management	Ü	
StudyBuilder Student	Database software for audit,	\$49.00	2004-11-27
Edition DE	clinical trials, registries and	*	
	patient management for students		
FerriGuide6 TM	Zero right in on the information	\$39.95	2004-11-27
	busy readers need—differential		
	diagnoses, clinical findings, lab		
	values, and treatment guidelines.		
Stedmans A TM	Provides yet another format for	\$38.95	2004-11-27
	healthcare students and		
	professionals to quickly access		
	medical abbreviations, acronyms		
	& symbols and their expansions		
5) (CCTV 2005	at the touch of their stylus.	06407	2004 11 25
<u>5MCC™ 2005</u>	A comprehensive and structured	\$64.95	2004-11-27
	clinical resource that is one of		
	the most respected sources of		
	information for medical		
Applicate 2.5 (ADM	disorders.	¢00.00	2004 11 26
AcuPoints 3.5 (ARM,	A AcupunctureSoftware for	\$89.99	2004-11-26

Name	Description	Cost	Date Added
XScale)	Professionals, Interns, &		
	Students: Point locations, Notes		
	area, Diagnosis / Treatment area,		
	Body Measurement Pictures,		
	Custom Protocols		
<u>ClinUrologyTM</u>	Fundamental help with all major	\$64.95	2004-11-24
	urologic conditions and diseases,		
	plus time-saving		
	recommendations on important		
D 1 TM	problems.	Φ70.00	2004 11 24
<u>emPedsTM</u>	Designed for use by practicing	\$79.00	2004-11-24
	physicians, academicians and		
	residents to provide rapid		
Win-Cl1	answers to clinical questions.	#20.0 <i>5</i>	2004 11 24
<u>VaccineCheck</u>	VaccineCheck offers the only	\$39.95	2004-11-24
Immunization Program	interactive immunization		
	program that will create an immunization schedule for any		
	individual up to the age of 21		
	1		
Clinical Neurology - 2005	years. A medical reference text with	\$11.95	2004-11-24
Clinical Neurology - 2003	detailed step-by-step procedures,	\$11.93	2004-11-24
	work-ups and treatments.		
My ICD Codes	My ICD Codes is a tool to let	\$49.99	2004-11-24
Wy ICD Codes	you lookup ICD9 and ICD 10	\$47.77	2004-11-24
	Codes. ICD-10-CM/ICD-9-CM		
	CLASSIFICATION OF		
	DISEASES AND INJURIES,		
	ICD-9-CM CLASSIFICATION		
	OF Drug, etc		
XTerm Medical Dictionary	Medical dictionary including	\$15.50	2004-11-10
	unit converter and clinical		
	calculators		
<u>emPedSurgTM</u>	Designed for use by practicing	\$49.00	2004-11-10
	surgeons, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
Inside StudyBuilder	The definitive guide to using	\$49.99	2004-11-10
	StudyBuilder study design,		
	management and data collection		
	tools in Adobe Acrobat format		
FamilyRx TM	Positive outcomes are achieved	\$15.00	2004-11-10
	because patients understand the		
	benefits and potential dangers of		
	their medications.		

Name	Description	Cost	Date Added
emRadio™ (eMedicine	Designed for use by practicing	\$49.00	2004-11-10
Radiology)	physicians, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
<u>emPMRTM</u>	Designed for use by practicing	\$49.00	2004-11-10
	physicians, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
Vision Software Pack for	Our best software at the best	\$38.69	2004-10-27
PPC 2002	Price (Utilities, Health & Diet		
	and funny games) - 50%		
	Discount		
PracticalTEETM	Get detailed "how-to"	\$79.95	2004-10-27
	information on transesophageal		
	echocardiography (TEE) in the		
	operating room, intensive care		
	unit, office, or any other clinical		
	setting.		
HlthAssess TM	Instant access to all the	\$35.95	2004-10-27
	assessment information nurses		
	need.		
emOPHTM	Designed for use by practicing	\$49.00	2004-10-27
	physicians, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
emNeuro TM	Designed for use by practicing	\$49.00	2004-10-27
	physicians, academicians and		
	residents to provide rapid		
	answers to clinical questions.		
<u>i2Workout PPC</u>	iFit.com compatible treadwill	\$19.95	2004-10-27
	workout development and		
	control program.		
<u>ClinSkillsTM</u>	This PDA reference provides	\$39.95	2004-10-27
	instant guidance for performing		
	over 165 skills.		
PracticalTEE TM	Get detailed "how-to"	\$79.95	2004-10-08
	information on transesophageal		
	echocardiography (TEE) in the		
	operating room, intensive care		
	unit, office, or any other clinical		
	setting.		
MGHAnes TM	Provides instant access to	\$49.95	2004-10-08
	guidelines for anesthesia		
	procedures throughout the		
	preoperative, intraoperative, and		

Name	Description	Cost	Date Added
	postoperative periods.		
MedScales Clinical	MedScales provides quick	\$79.95	2004-10-08
Assessment Software	access and scoring of commonly		
	used medical scales.		
MD Coder PocketPC -	MD Coder PPC download	\$279.0	2004-10-08
<u>Vascular Surgery</u>	includes the MD Coder PC	0	
	application & all 20 PocketPC		
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
	for free.		
MD Coder PocketPC -	MD Coder PPC download	\$279.0	2004-10-08
Urology	includes the MD Coder PC	0	
	application & all 20 PocketPC		
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
MD Coder PocketPC -	for free. MD Coder PPC download	\$279.0	2004-10-08
	includes the MD Coder PC	0	2004-10-08
Trauma	application & all 20 PocketPC	U	
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
	for free.		
MD Coder PocketPC -	MD Coder PPC download	\$279.0	2004-10-08
Thoracic Surgery	includes the MD Coder PC	0	
	application & all 20 PocketPC		
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
	for free.		
MD Coder PocketPC -	MD Coder PPC download	\$279.0	2004-10-08
<u>Pulmnology</u>	includes the MD Coder PC	0	
	application & all 20 PocketPC		
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
MD Coder PocketPC -	for free. MD Coder PPC download	\$279.0	2004-10-08
Plastic Surgery	includes the MD Coder PC	\$279.0	200 4- 10-08
Trastic Burgery	application & all 20 PocketPC		
	Specialities. Choose your		
	speciality to install. A complete		
	Charge Capture solution. Try it		
	charge captair bolation. Try it	ı	

Name	Description	Cost	Date Added
	for free.		
MD Coder PocketPC - Pediatric Surgery	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your	\$279.0	2004-10-08
	speciality to install. A complete Charge Capture solution. Try it for free.	ф 2.7 0.0	2004 10 00
MD Coder PocketPC - ENT	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Orthopedics	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Opthalmology	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - OBGYN	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Neurosurgery	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Neurology	MD Coder PPC download includes the MD Coder PC	\$279.0 0	2004-10-08

Name	Description	Cost	Date Added
	application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.		
MD Coder PocketPC - Nephrology	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Internal Medicine	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - General Surgery	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
MD Coder PocketPC - Gastroenterology	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
LNDG05™	Updated for 2005 with more than 800 complete drug entries, this PDA reference provides instant access to all the drug information nurses need in day-to-day practice.	\$44.95	2004-10-08
MD Coder PocketPC - Family Practice	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it	\$279.0	2004-10-08

Name	Description	Cost	Date Added
	for free.		
MDCoder PocketPC - Facial Plastic	MD Coder PPC download includes the MD Coder PC application & all 25 PocketPC Specialities. Choose your	\$279.0	2004-10-08
	speciality to install. A complete Charge Capture solution. Try it for free.	.	
MD Coder PocketPC - Cardiology	MD Coder PPC download includes the MD Coder PC application & all 20 PocketPC Specialities. Choose your speciality to install. A complete Charge Capture solution. Try it for free.	\$279.0	2004-10-08
FitnessPlus for Windows Mobile Suite	Most Comprehensive and Powerful Diet and Exercise Tracking Tool for Window Mobile Device! Free Desktop Application included!	\$19.95	2004-10-08
First Aid Plus	Medical emergencies dont occur every day when they do you need to deal, gives FIRST AID Tips for many MISHAPS and some life saving instructions! Youll definitely love it.	\$7.99	2004-10-08
NDH05 TM (Nursing2005 Drug Handbook)	Leading nursing drug reference with the latest information on over 1,000 generic and 3,500 brand-name drugs.	\$44.95	2004-10-08
RNDxInt9™	Helps nursing students identify interventions most commonly associated with nursing diagnoses when caring for patients.	\$32.95	2004-10-08
Food & Nutrition Guide	Enhance your diet to improve your health and reduce the risk of heart disease and cancer.	\$4.95	2004-10-08
HealthPack+	A tool to make sure you are FIT and Healthy.Contains more than 20 Modules including BP,weight,Gulcose tracker and BMI calculator and Much more	\$14.95	2004-09-18
Fertility calendar	Fertility calculator predicts menstruation and fertility cycles.	\$14.95	2004-09-18

Name	Description	Cost	Date Added
	Based on algorithm from		
	Feminist Womens Health Center		
	and papers from National		
	Institutes of Health.		
PEPID PRIMARY CARE	The only "all-in-one" fully	\$139.9	2004-09-18
PLUS Physician Suite	integrated physician reference	5	
	software.		
PEPID PRIMARY CARE	The only "all-in-one" fully	\$139.9	2004-09-18
PLUS Physician Suite	integrated physician reference	5	
	software.		
PEPID RN+ONS	Introducing the PEPID	\$139.9	2004-09-18
Oncology Nursing	RN+ONS Suite developed in	5	
	partnership with the Oncology		
	Nursing Society.		
PEPID RN+ONS	Introducing the PEPID	\$139.9	2004-09-18
Oncology Nursing	RN+ONS Suite developed in	5	
	partnership with the Oncology		
	Nursing Society.		
Natural Standard - 1 Year	Natural Standard for Pocket PC	\$59.95	2004-09-18
Subscription			
BartlettID04 TM	Written by noted authority Dr.	\$29.95	2004-09-18
	John Bartlett, this practical		
	reference on PDA covers all		
	relevant aspects of antibiotics.		
PoisonOD TM	The best manual on the	\$44.95	2004-09-11
	diagnosis and treatment of		
	poisoning and drug overdose.		
<u>EmergAirTM</u>	Offers step-by-step instructions	\$49.95	2004-09-11
	on techniques, drug		
	administration, and prevention		
	and management of		
	complications and includes		
	extensive coverage of difficult		
	clinical scenarios.	_	
My temperature tracker	Track your body temperature	\$2.80	2004-09-11
	when you are ill and monitor its		
	variance.The software supports		
	and automatically recognizes		
	both Fahrenheit and Celsius		
	units.		
My medications scheduler	Create a complete register of all	\$3.90	2004-09-11
	medications you take and		
	establish a treatment program		
	including their dosage and		
	frequency. Reminder included.		

Name	Description	Cost	Date Added
My doctors appointments	Create an address book and	\$3.20	2004-09-11
	appointments schedule including		
	all doctors you come into contact		
	with. You can use a reminder		
	function and import contacts.		
My blood pressure tracker	The program is focused on fast	\$4.80	2004-09-11
	data entry and convenient		
	summaries of your Blood		
	Pressure and pulse rates.		
Med Trakker	A PDA medical history record	\$9.95	2004-09-11
	keeper for the whole family.		
Terrorism: The Medical	A medical reference text with	\$6.95	2004-09-11
Response 2005	detailed step-by-step procedures,		
	work-ups and treatments.		
Personal Health Tracker	With PHT you can track your	\$8.69	2004-09-11
	medicine intake, blood pressure,		
	pulse, temperature variance and		
	organize your check up		
	appointments.		
PCProc TM	A convenient how-to guide to	\$89.95	2004-09-11
	more than 70 medical		
	procedures most commonly		
	performed in an office setting.		
OBGRecall TM	Facilitates rapid review and	\$32.95	2004-09-11
	memorization of the key		
	concepts encountered during the		
	OB/GYN rotation with a concise		
	question-and-answer format.		
CancerPRATM	Information to help you reach	\$39.95	2004-09-01
	your patients with up-to-date,		
	engaging messages about how		
	they can lower their cancer risk.		
MedCalc 3000 Pocket PC	MedCalc 3000 Pocket PC is the	\$34.95	2004-09-01
	handheld version of the most		
	popular medical calculator on		
	the web. MedCalc 3000 has		
	hundreds of equations, criteria		
	sets, decision trees and more.		
Health Master	Complete HealthCare Tool	\$9.99	2004-09-01
	which includes 20 modules.		
	Extensive tools, Exports with		
	Desktop Backup, Password		
	Protection, Reminders, Color		
	Settings, Calculator, BP tracker		
	and more.		

Name	Description	Cost	Date Added
RNFastFacts3 TM	A compilation of all of those	\$28.95	2004-09-01
	hard-to-remember procedures,		
	calculations, lab values, and		
	interactions.		
USMLE S2 TM	Provides essential questions and	\$31.95	2004-09-01
	answers covering topics that		
	have appeared on recent Step II		
	exams.		
WillsEye4 TM	Clinicians will have instant	\$59.95	2004-08-23
	access to current information on		
	diagnosis and treatment of all		
LICHTIE CITM	eye disorders.	024.05	2004.00.22
USMLE-S1 TM	This quick, easy-to-use review	\$34.95	2004-08-23
	helps students get prepared for		
PCGuides TM	Step One of the USMLE. The most current clinical	\$19.95	2004-08-23
reduides	practice guidelines in primary	Φ17.73	2004-08-23
	care.		
DietOrganizer Pocket	Diet Organizer Pocket is an easy	\$25.00	2004-08-23
<u>Dictorgamzer rocket</u>	to use yet powerful food and	Ψ23.00	2004 00 23
	exercise diet diary.		
Pkt Medical Calculator-	A Complete collection of 150+	\$45.00	2004-08-05
SH3(new)	MedicalCalculators & 23+	4 10111	
	medical criterias. No need to		
	remember complicated		
	formulas.Transform your		
	handheld into a powerful		
	medical Calculation tool.		
smartVenus for Pocket PC	A personal ovulation calendar	\$5.00	2004-08-05
- Mips	and family planning tool for		
	women		
<u>Vaccines</u> TM	Practical, up-to-date guidelines	\$49.95	2004-08-05
	on proper use of vaccines and		
	helps clinicians answer the many		
	questions asked by patients and		
	parents.	01400	2004.00.05
Surgical Intern Pocket	The Surgical Intern Pocket	\$14.00	2004-08-05
Survival Guide The EVC Peaket Survival	Survival Guide for Pocket PC The EVC Pocket Survival Guide	¢1400	2004 00 05
The EKG Pocket Survival Guide	The EKG Pocket Survival Guide for Pocket PC	\$14.00	2004-08-05
Oncology Intern Pocket		\$14.00	2004-08-05
Survival Guide	The Oncology Intern Pocket Survival Guide for Pocket PC	\$14.00	ZUU4-U8-U3
The CCU Intern Pocket	The CCU Intern Pocket Survival	\$14.00	2004-08-05
Survival Guide	Guide for Pocket PC	\$14.00	2004-00-03
The Intern Pocket Survival	The Intern Pocket Survival	\$14.00	2004-08-05
The intern rocket Survival	THE HILTH FUCKEL SULVIVAL	\$14.00	2004-00-03

Name	Description	Cost	Date Added
Guide	Guide		
The ACLS Pocket Survival	The ACLS Pocket Survival	\$14.00	2004-08-05
<u>Guide</u>	Guide for Pocket PC		
Gynecological Pearls	Gynecological Pearls for Pocket	\$29.95	2004-08-05
	PC		
American Psychiatric	American Psychiatric	\$89.95	2004-08-05
Asso. Guidelines	Association Practice Guidelines		
	for Pocket PC		
Davis Guide to IV	Davis Guide to IV Medications	\$49.95	2004-08-05
Medications	for Pocket PC		
Obstetrical Pearls	Obstetrical Pearls for Pocket PC	\$29.95	2004-08-05
Surgical Pearls	Surgical Pearls for Pocket PC	\$29.95	2004-08-05
A Pocketful Of Prevention	A Pocketful Of Prevention for	\$14.00	2004-08-05
	Pocket PC		
The Merck Manual of	The Merck Manual of Geriatrics	\$74.99	2004-08-05
<u>Geriatrics</u>	for Pocket PC		
A-Z Drug Facts and	A to Z Drug Facts from Facts	\$75.00	2004-08-05
Comparisons	and Comparisons for Pocket PC		
Nursing Care Plans	Nursing Care Plans for Pocket	\$45.00	2004-08-05
	PC		
The 5 Minute Emergency	The 5 Minute Emergency	\$64.95	2004-08-05
Medicine Consult	Medicine Consult for Pocket PC		
5-Minute Infectious	The 5-Minute Infectious	\$64.95	2004-08-05
<u>Diseases Consult</u>	Diseases Consult for Pocket PC		
Tabers Cyclopedic Medical	Tabers Cyclopedic Medical	\$49.95	2004-08-05
Dictionary	Dictionary for Pocket PC		
Bones Flash Cards	This product is designed to guide	\$29.99	2004-08-05
	users through the entire human		
	skeletal system, from head to		
	toe.	* * * * * * *	
DSM-IV: Text Revision	DSM-IV: Text Revision for	\$59.95	2004-08-05
	Pocket PC		• • • • • • • •
5 Minute Pediatric Consult	5 Minute Pediatric Consult for	\$64.95	2004-08-05
DI :: D II II I	Pocket PC	Φ.7.7.00	2004.00.05
Physicians Drug Handbook	Physicians Drug Handbook for	\$75.00	2004-08-05
D. L.TH. TM	Pocket PC	Φ40.05	2004.00.05
PsychThrp TM	clinicians can instantly access	\$49.95	2004-08-05
	the most up-to-date,		
	authoritative guidelines for		
	diagnosing and treating the full		
The Morels Manual:	range of psychiatric disorders. Merck Manual: Centennial	\$70.05	2004 09 05
The Merck Manual:		\$79.95	2004-08-05
CVM state	Edition for Pocket PC	\$70.05	2004 09 05
Criffiths 5 Minute Clinical	CVMstat for PocketPC 5 Minute Clinical Consult for	\$79.95	2004-08-05
Griffiths 5-Minute Clinical	5-Minute Clinical Consult for	\$59.95	2004-08-05

Name	Description	Cost	Date Added
Consult	Pocket PC		
RxDrugs TM (AHFS Dosing	One-of-a-kind handheld version	\$39.00	2004-07-28
Companion)	of the extensively referenced,		
	evidence-based dosing		
	statements prepared by		
	professional editorial staff.		
LabTests TM	A best-selling clinical reference	\$42.95	2004-07-28
	on laboratory and diagnostic		
	tests for quick, easy point-of-		
	care access.		
Woman Plus	Woman Plus - your personal	\$14.95	2004-07-20
	cycle tracking system!Organize		
	yourself better!		
StudyBuilder Enterprise	Database software for audit,	\$4,999.	2004-07-20
Edition	clinical trials, registries and	00	
	patient management via the		
	Internet!		
StudyBuilder Professional	Database software for audit,	\$1,499.	2004-07-20
Edition	clinical trials, registries and	00	
	patient management.		
StudyBuilder Personal	Database software for audit,	\$499.0	2004-07-20
Edition	clinical trials, registries and	0	
	patient management		
StudyBuilder Student	Database software for audit,	\$149.0	2004-07-20
Edition	clinical trials, registries and	0	
	patient management for students		
<u>EBCard™</u>	An indispensable decision-	\$89.95	2004-07-09
	making aid for all physicians		
	who treat cardiovascular disease.		
<u>RxAllergiesTM</u>	A quick guide to drug allergies	\$49.95	2004-07-09
	and drug reactions for anyone		
	prescribing medications.		
MGHCC™	Presents hospital-tested	\$49.95	2004-06-30
	protocols that reflect today's		
	most advanced critical care		
	practices.		
Pkt Medical Calculator-	A Complete collection of 150+	\$45.00	2004-06-30
PPC/2002/2003	MedicalCalculators & 23+		
	medical criterias. No need to		
	remember complicated		
	formulas.Transform your		
	handheld into a powerful		
	medical Calculation tool.		
<u>GymMate</u>	Get your fitness schedule	\$9.99	2004-06-30
	organized with GymMate for		

Name	Description	Cost	Date Added
	PocketPC!		
SurgOnco TM	From the world-renowned M.D.	\$52.95	2004-06-30
	Anderson Cancer Center, this		
	reference is a practical guide to		
	established surgical oncology		
	principles for each organ system.		
NDisCheck TM	Designed for quick reference at	\$44.95	2004-06-30
	the nurses station, this reference		
	presents succinct, bulleted		
	information on 450 diseases.		
Maxillofacial Trauma	Oral and Maxillofacial Trauma	\$38.00	2004-06-30
<u>Database</u>	Database and Patient Tracker		
Dorlands2 TM	Based on the "gold standard" of	\$39.95	2004-06-30
	the medical community,		
	Dorlands Pocket Medical		
	Dictionary covers the must-		
	know vocabulary.		
PubMed on Tap	PubMed on Tap is an application	freewar	2004-06-30
	for PDAs that retrieves	e	
	MEDLINE® citations directly		
	from the PDA through a wireless		
	connection to the Internet.		
NursDiag TM	A quick reference to nursing	\$32.95	2004-06-30
	diagnosis and can be used as a		
	supplement for any nursing		
	diagnosis text.		
FMS Impact PocketPC	Complete the fibromyalgia	\$14.95	2004-06-19
	syndrome impact questionnaire		
	repeatedly over time. The		
	software generates a graph of		
	your test result history.		
Midnight Medicine	Midnight Medicine: a quick-	\$29.99	2004-06-19
	reference to assist primary care		
	physicians and house staff in		
	managing common medical		
	emergencies.		
<u>Ultimate Organ Systems</u>	This product examines the	\$99.99	2004-06-19
Flash Cards	structures and functions of the		
	entire human body with 244 high		
*** 12.6.12.6.75	resolution images.	4.50 2.5	2004.25.12
WashMnl31 TM	The industry gold standard for	\$59.95	2004-06-19
	over 40 years providing		
	authoritative daily guidance for		
	treating your patients.		
<u>ClinRx Pocket PC</u>	ClinRx is a creatinine clearance	freewar	2004-06-09

Name	Description	Cost	Date Added
	calculator for pharmacists,	e	
	physicians and other health care		
	providers.		
<u>ACPPierTM</u>	The authority in evidence-based	\$99.00	2004-06-09
	guidance for clinicians designed		
	for rapid point-of-care delivery		
	on the diagnosis and treatment of		
	diseases.		
NurProc TM	Gives nurses instant access to	\$49.95	2004-06-09
	step-by-step instructions for		
	more than 500 procedures.		
AMStedman TM	The essential reference work for	\$27.00	2004-06-09
	everyone concerned with		
	medicine and health today.		
NatMed04 TM	Natural Medicines	\$92.00	2004-06-09
	Comprehensive Database 2004		
	gives you everything you want		
	to know about herbs, vitamins,		
	minerals, supplements.		
<u>Tabers Cyclopedic Medical</u>	Tabers Cyclopedic 19th edition	\$48.99	2004-06-09
<u>Dictionary</u>	is a leading medical dictionary		
	with over 50,000 entries.		
Special Senses Anatomy	The Special Senses System	\$19.99	2004-06-09
Flash Cards	examines the structures and		
	functions of the five human		
	senses.		
<u>Lymphatic System</u>	The Lymphatic System	\$19.99	2004-06-09
Anatomy Flash Cards	examines the structures and		
	functions of the lymph vessels		
	through the body.		
Integument System	The Integument System	\$19.99	2004-06-09
Anatomy Flash Cards	examines the structures and		
	functions of the bodys surface,		
	the skin.		
<u>AnesRevTM</u>	This is the first comprehensive	\$59.95	2004-06-09
	anesthesia review for PDAs and		
	is the perfect study aid for		
	written and oral board exams.		
EMonCall TM	Assists in the initial evaluation	\$44.95	2004-05-31
	and treatment of the most		
	frequently encountered problems		
	in emergency medicine, both		
	common and potentially life-		
	threatening.	<u>+</u> -	
Relax - Nature sounds and	Music to reduce and manage	\$5.00	2004-05-31

Name	Description	Cost	Date Added
Piano Music	Stress, Anxiety and Depression.		
	Ultra relax music and nature		
	sounds in wma format for you		
	can ear in your Pocket Pc or in		
	you Desktop Pc.		
Clin-eRx04 TM	Revised annually, this quick	\$19.95	2004-05-31
	access guide covers more than		
	1,000 of the most commonly		
	used medications.		
IdentADrg4 TM	Ident-A-Drug [™] gives you quick	\$39.50	2004-05-31
	accurate identification of oral		
	tablets and capsules used in		
	North America by the		
	identification code imprinted on		
	all medications.		
<u>HSCPeds™</u>	A practical guide for diagnosis	\$54.95	2004-05-20
	and management of pediatric		
	patients in primary, secondary,		
	and tertiary care.		
<u>CardioDxTx™</u>	Only the essential information	\$29.95	2004-05-20
	needed to diagnose and manage		
	patients with cardiac diseases.		
Endocrine System	The Endocrine System examines	\$19.99	2004-05-20
Anatomy Flash Cards	the structures and functions of		
	glands through the entire body.		
Pocket Homeopath	Homeopathic software for those	\$24.95	2004-05-20
	new to homeopathy.		
<u>MedicalEncyclopedia</u>	Medical Encyclopedia have	\$35.00	2004-05-20
[MIPS] PktPC(New)	become another invaluable tool		
	available on the Pocket PC. Over		
	55,000 + Entries defining and		
	explaining the major medical		
	terms, Diseases, & Human		
	parts,FirstAid etc.,		
FryesRN5 TM	This unique preparation tool	\$24.95	2004-05-20
	helps students prepare for the		
	exam by presenting key facts in		
) () () () () () () () () () (random order.	Φ 2.7	2004.05.50
MedicalEncyclopedia[SH3	Medical Encyclopedia have	\$35.00	2004-05-20
]PktPC/2002/2003	become another invaluable tool		
	available on the Pocket PC. Over		
	55,000 + Entries defining and		
	explaining the major medical		
	terms, Diseases, & Human		
	parts,FirstAid etc.,		

Name	Description	Cost	Date Added
Urinary System Anatomy	The Urinary System examines	\$19.99	2004-05-16
Flash Cards	the structures and functions of		
	the entire urinary system.		
PedsSx TM	This practical guide helps	\$54.95	2004-05-16
	clinicians streamline pediatric		
	diagnosis with a comprehensive,		
	integrated, logical approach to		
	analysis of symptoms and signs.		
<u>ClinicalMedTM</u>	The ideal reference for students	\$39.95	2004-05-16
	throughout their clinical studies.		
Respiratory System	The Respiratory System	\$19.99	2004-05-16
Anatomy Flash Cards	examines the structures and		
	functions of the entire		
	respiratory system.		
OncoMd04 TM	Completely revised and updated	\$69.95	2004-05-16
	for 2004, this practical handbook		
	is an up-to-date guide to all		
	aspects of cancer chemotherapy.		
Muscles Database	Handbase Database of all	\$15.00	2004-05-16
	muscles, origins, insertions,		
	actions, nerve and vascular		
	supply for the whole body.		
Nerves Database	HanDbase database of all nerves	\$10.00	2004-05-16
	in body, their source, branches,		
	whether they are motor, sensory		
	or both, etc.		
<u>HealthFile Plus</u>	Includes PC Companion! Best-	\$29.99	2004-05-16
	selling personal health and		
	medical records software. Store		
	appointments, allergies, weight,		
	etc.		
OslerHbk TM	Covers all of the essential topics	\$49.95	2004-05-16
	encountered in the daily		
	practice—written by		
	contributors from the Johns		
	Hopkins Hospital.		
CarboCounter for Pocket	CarboCounter keeps your low	\$14.95	2004-05-16
PC	carb diet on track!	<u>.</u>	
BurnScore (english	BurnScore is a software for	\$10.00	2004-05-16
version)	evaluate the severity of a burned		
	patient, calculating the		
	percentage of body surface area		
	burned and the probality of		
	survival.	**	
NonSmokers Clock	NonSmokers Clock is a Pocket	\$2.99	2004-05-16

Name	Description	Cost	Date Added
	PC software that help you to quit		
	smoking.		
BurnScore (spanish	BurnScore permite hacer una	\$10.00	2004-05-03
version)	rápida valoración al paciente		
	quemado, cuantificando la		
	superficie quemada y valorando		
N. G. I. A. I.	su pronóstico.	#10.00	2004.05.02
Nervous System Anatomy	The Nervous System examines	\$19.99	2004-05-03
Flash Cards	the structures and functions of		
5NTM	the entire nervous system.	\$70.0 <i>5</i>	2004.05.02
5mNeuro TM	The perfect on-the-spot	\$79.95	2004-05-03
	reference guide for neurologic		
NeuroHB TM	symptoms and disease.	\$59.95	2004-05-03
INCUIUTD***	See vital information on specific signs and symptoms, diagnostic	ゆンプ.ソン	2004-03-03
	tests, and the gamut of		
	neurologic conditions.		
FerriCA04 TM	The fast, efficient way to access	\$64.95	2004-05-03
remeno	the important diagnostic and	Ψ04.73	2004 03 03
	therapeutic information you need		
	every day!		
OncoRn04 TM	A comprehensive nursing	\$49.95	2004-05-03
one or the or	resource for assessment,	ψ.,,,,,,	200.00
	intervention, and patient		
	education in the administration		
	of oncology drugs.		
AcuPoints 3.0 (ARM,	AcupunctureSoftware for	\$79.99	2004-05-03
XScale)	Professionals, Interns, &		
	Students: Point locations, Notes		
	area, Diagnosis / Treatment area,		
	Body Measurement Pictures,		
	Special Points, etc.		
Reproductive System	The Reproductive System	\$19.99	2004-05-03
Anatomy Flash Cards	examines the structures and		
	functions of both the male and		
D: 1774	female systems.	01 5 2 2	2001.05.05
<u>RiskTM</u>	An indispensable and timely	\$16.00	2004-05-03
	guide, Risk is the authority for		
	assessing threats to your health		
ModTostsTM	and safety.	¢40.00	2004 05 02
<u>MedTestsTM</u>	A comprehensive guide to	\$40.00	2004-05-03
	hundreds of the most commonly		
	performed medical diagnostic tests.		
PregRx TM		\$70.05	2004 05 02
riegkx***	Have dosing advice and drug	\$79.95	2004-05-03

Name	Description	Cost	Date Added
	interaction information for your pregnant and lactating patients in the palm of your hand!		
<u>WUCGastroTM</u>	This handy quick reference is a current and easily accessible guide to the common problems that a gastroenterologist encounters on a daily basis.	\$39.95	2004-05-03
NPAdults2 TM	Developed by clinical experts to provide fast and easy access to information needed to provide comprehensive care to adult patients in the primary care setting.	\$59.95	2004-05-03
Weight Loss	Get the facts about weight loss and take an active approach to your health.Successful weight loss means making changes to your eating and activity habits that you can maintain for life.	\$10.00	2004-05-03
PsychRcall TM	Facilitates rapid review and memorization of the key concepts encountered during the psychiatry rotation with a concise question-and-answer format.	\$32.95	2004-05-03
smartVenus for Pocket PC - SH3	A personal ovulation calendar and family planning tool for women	\$10.00	2004-05-03
WUCGMed™	Prepared by residents, fellows, and attending physicians, this handy reference is a practical guide to the general internal medicine consult.	\$39.95	2004-05-03
<u>HandyHeart</u>	Free tool for anyone interested in cardiology healthcare. Includes utilities covering lipid management, hypertension, and nearly all cardiovascular medications.	freewar e	2004-04-25
<u>HandyRef</u>	Free general medicine reference tool for Pocket PC's for medical students, residents, and anyone else working in medicine. Includes utilities for DKA	freewar e	2004-04-25

Name	Description	Cost	Date Added
	Management, Narcotic Dose Equivalencies, Insulin Sliding Scales, Mini-Mental Status Exam, and the G		
Clinical Pediatrics	A medical reference text with detailed step-by-step procedures, work-ups and treatments.	\$10.95	2004-04-13
PMRRx TM	A handy quick-reference tool for busy residents and clinicians with key facts and points essential for day-to-day patient care	\$39.95	2004-04-13
Cardiovascular Anatomy Flash Cards	Cardiovascular Anatomy Flash Cards is designed to effectively demonstrate the heart, veins, and arteries of the cardiovascular system.	\$19.99	2004-04-13
Complete Dental Reference-PPC/2002/2003	A Complte Knowledge Pack Reference utility for Dentists. More than 50 + topics defining A-z of Dental Terms, Anatomy, Oral Pathology and more ., A must tool for every dentists to students.	\$20.00	2004-04-13
Muscles Anatomy Flash Cards	Muscles Anatomy Flash Cards is designed to illustrate every functional muscle of the human body from the shoulder girdle down.	\$29.99	2004-04-13
Immunizations & Vaccinations Calendar	Get vital information about when to get immunizations & vaccinations, and how they work.	freewar e	2004-04-13
RadProc TM	This PDA version of the RadProc covers all current proceduresfrom venous access techniques and embolizations to stent-grafts and carbon dioxide angiography.	\$59.95	2004-04-04
Clinical Psychiatry	A medical reference text with detailed step-by-step procedures, work-ups and treatments.	\$9.95	2004-04-04
Calories Burned Calculator	How many calories are burnt during exercise? Use this calculator to find out how many	\$1.99	2004-04-04

Name	Description	Cost	Date Added
	calories are lost during your		
	exercise routines.		
Clinical Gastroenterology	A medical reference text with	\$9.95	2004-04-04
	detailed step-by-step procedures,		
	work-ups and treatments.		
NoDip (for PocketPC)	NoDip is a 5 Step program	\$24.95	2004-04-04
	designed to help you quit		
	smokeless tobacco.		
<u>NpWomensTM</u>	An enlightening clinical	\$59.95	2004-04-04
	reference for students and		
	clinicians working in women's		
	health.		
RNLabs4 TM	Detailed overviews of	\$45.95	2004-04-04
	physiology to help students think		
	critically and understand the		
	results of laboratory and		
	diagnostic tests and their		
	implications for therapy.	# O O #	2004.04.04
Clinical Allergy &	A medical reference text with	\$8.95	2004-04-04
Immunology	detailed step-by-step procedures,		
) () () () () () () () () () (work-ups and treatments.	#25.00	2004.04.04
MedicalEncyclopedia[new]	Medical Encyclopedia have	\$35.00	2004-04-04
PktPC/2002/2003	become another invaluable tool		
	available on the Pocket PC. Over		
	55,000 + Entries defining and		
	explaining the major medical		
	terms, Diseases, & Human		
CI: 1 IN 1 1	parts,FirstAid etc.,	ΦΩ ΩΩ	2004.04.04
Clinical Nephrology	A medical reference text with	\$9.99	2004-04-04
	detailed step-by-step procedures,		
CI: : III I	work-ups and treatments.	ΦΩ ΩΩ	2004.04.04
Clinical Urology	A medical reference text with	\$8.99	2004-04-04
	detailed step-by-step procedures,		
MyCnortTraining Polar	work-ups and treatments.	\$8.95	2004-04-04
MySportTraining Polar	Download workouts from your Polar® S-series heart rate	\$0.93	2004-04-04
	monitors right into your		
	PocketPC using this extension to		
	the award-winning		
	MySportTraining for PocketPC.		
CAChemoRx TM	On-the-spot guide to the use of	\$49.95	2004-04-04
<u>Cremental</u>	chemotherapy for specific	ψ τ γ . γ .	2007-07-07
	cancers.		
PedsRecall TM	Designed for easy access and	\$32.95	2004-04-04
- Cubicount	study in a rapid-fire question-	Ψ52.75	
	stady in a rapid life question-	l	

Name	Description	Cost	Date Added
	and-answer format for medical		
	students on pediatric clerkships.		
5mVetCF TM	Authoritative answers to all your	\$89.00	2004-04-04
	questions about clinical		
	problems frequently encountered		
	in practice.		
<u>ClinTrialsTM</u>	Designed to synthesize current	\$69.95	2004-04-04
	cardiovascular research findings		
	for busy physicians and		
	healthcare professionals.		
Clinical Womens Health	A medical reference text with	\$9.95	2004-04-04
	detailed step-by-step procedures,		
	work-ups and treatments.		
Clinical Rheumatology &	A medical reference text with	\$9.95	2004-04-04
<u>Pain</u>	detailed step-by-step procedures,		
	work-ups and treatments.		
Tarascon Pediatric	Tarascon Pediatric Emergency	\$29.99	2004-04-04
Emergency Pocketbook	Pocketbook has 100% of the		
	venerablecontent of this		
	extremely popular pocket		
	reference.		
<u>DosimetryTables</u>	Dosimetry Tables for radiation	\$24.95	2004-04-04
-	therapy		
MedicalEncyclopedia[new]	Medical Encyclopedia have	\$35.00	2004-03-18
PktPC/2002/2003	become another invaluable tool		
	available on the Pocket PC. Over		
	55,000 + Entries defining and		
	explaining the major medical		
	terms, Diseases, & Human		
	parts,FirstAid etc.,		
Clinical Nephrology	A medical reference text with	\$9.99	2004-03-18
	detailed step-by-step procedures,		
	work-ups and treatments.		
Clinical Urology	A medical reference text with	\$8.99	2004-03-18
	detailed step-by-step procedures,		
	work-ups and treatments.		
MySportTraining Polar	Download workouts from your	\$8.95	2004-03-18
_	Polar® S-series heart rate		
	monitors right into your		
	PocketPC using this extension to		
	the award-winning		
	MySportTraining for PocketPC.		
<u>CAChemoRx</u> TM	On-the-spot guide to the use of	\$49.95	2004-03-18
	chemotherapy for specific		
	cancers.		

Name	Description	Cost	Date Added
PedsRecall TM	Designed for easy access and	\$32.95	2004-03-18
	study in a rapid-fire question-		
	and-answer format for medical		
	students on pediatric clerkships.		
5mVetCF TM	Authoritative answers to all your	\$89.00	2004-03-18
	questions about clinical		
	problems frequently encountered		
	in practice.		
<u>ClinTrialsTM</u>	Designed to synthesize current	\$69.95	2004-03-18
	cardiovascular research findings		
	for busy physicians and		
Clinical Warrang Haalth	healthcare professionals.	¢0.05	2004 02 19
Clinical Womens Health	A medical reference text with	\$9.95	2004-03-18
	detailed step-by-step procedures,		
Clinical Rheumatology &	work-ups and treatments. A medical reference text with	\$9.95	2004-03-18
Pain	detailed step-by-step procedures,	φ <i>3.33</i>	2004-03-10
1 am	work-ups and treatments.		
Tarascon Pediatric	Tarascon Pediatric Emergency	\$29.99	2004-03-18
Emergency Pocketbook	Pocketbook has 100% of the	ΨΔ7.77	2004-03-10
Emergency r ocketoook	venerablecontent of this		
	extremely popular pocket		
	reference.		
DosimetryTables	Dosimetry Tables for radiation	\$24.95	2004-03-18
	therapy		
<u>Diet Partner</u>	Dietary Intake and Exercise	\$19.95	2004-03-09
	Tracking made easy!		
Clinical ENT	A medical reference text with	\$8.99	2004-02-28
	detailed step-by-step procedures,		
	work-ups and treatments.		
Clinical Endocrinology	A medical reference text with	\$9.99	2004-02-28
	detailed step-by-step procedures,		
HADATOTM	work-ups and treatments.	0.41.07	2004.02.20
IVDH8 TM	Crucial details that make safe	\$41.95	2004-02-28
	and effective administration of		
	I.V. drugs possible are now just		
Critical Cara & Naturities	one tap away!	¢11 05	2004 02 10
Critical Care & Nutrition	A medical reference text with	\$11.95	2004-02-19
	detailed step-by-step procedures,		
Clinical Trauma and	work-ups and treatments. A medical reference text with	\$14.95	2004-02-19
	detailed step-by-step procedures,	\$14.73	2004-02-19
Toxicology	work-ups and treatments.		
ButtOut!	ButtOut! is a Pocket PC	\$4.99	2004-02-10
<u>DuttOut:</u>	application that is designed to	ψ7.22	200 4- 02 - 10
	application that is designed to		

Name	Description	Cost	Date Added
	encourage and help the user during the process of quitting smoking.		
<u>HealthTrax</u>	Healthcare information on demand in the Palm of your hand!	freewar e	2004-02-10
Harrisons™	Referenced to the worlds best- selling internal medicine textbook, this handy reference provides on-the-spot answers to the problems you face daily.	\$59.95	2004-02-10
Nuvitec ICD10 Browser	Der ICD10 Browser erleichtert Ihnen die Code- oder Textsuche nach ICD10 komformen Diagnosenbezeichnungen. Genauere Information: http://www.nuvitec.com/icd10br owser.html	\$11.00	2004-02-04
GNP3™	Guide to Popular Natural Products includes 125 informative monographs covering the most popular herbal products.	\$19.95	2004-02-04
BreastCRA TM	Provides on-the-spot clinical guidelines for assessing and advising patients on their risk of breast cancer.	\$49.95	2004-02-04
WUHemOnc TM	This handy reference is a practical guide to the diagnosis and treatment of hematologic disorders and adult malignancies.	\$39.95	2004-02-04
<u>NpPediatric™</u>	A concise manual to assist in their assessment, evaluation of signs and symptoms, and initiation of treatment of children and adolescents.	\$59.95	2004-02-04
NpGeriatric TM	A clinical resource for advanced practice nurses and students who are privileged to provide primary care to older adults.	\$59.95	2004-02-04
Infodev Diet Point Calculator	An easy to use software takes calories, fat, and fiber, and calculates the diet points using accurate method.	\$1.51	2004-02-04

Name	Description	Cost	Date Added
Clinical Orthopedics	A medical reference text with	\$10.95	2004-02-04
	detailed step-by-step procedures,		
	work-ups and treatments.		
NutriMed (spanish version)	Calcula facil y rápidamente los	\$11.99	2004-01-31
	requerimientos energéticos para		
	los pacientes que precisan		
	nutrición enteral o parenteral.		
SiDiary	Free diabetes management	freewar	2004-01-31
	software for PocketPC and	e	
	windows.		
DietCalc (All processors)	DietCalcPPC version 1.0 is a	\$6.99	2004-01-31
	program that allows Pocket PC		
	users to calculate various		
	Diet/Health items.	044.33	2004 21 21
Clinical Neurology	A medical reference text with	\$11.99	2004-01-31
	detailed step-by-step procedures,		
W. M. C. L. L.	work-ups and treatments.	Φ2.00	2004.01.21
<u>Health Calculator</u>	11 Most Vital Health	\$2.00	2004-01-31
	Calculations with Specifications		
	to analyze your Health.		
	Automatic Calculation with		
	HTML/Text/CSV Backup.		
	Supports both Imperial & Metric		
NixteiMad (an aligh yearsign)	form of Calculation.	\$11.99	2004-01-27
NutriMed (english version)	Calculate easily and quickly the	\$11.99	2004-01-27
	energy requirements for patients who need enteral or parenteral		
	nutrition.		
SurgRecall TM	SurgRecall TM (Surgical Recall,	\$34.95	2004-01-27
Sugrecan	3rd Ed.)Designed for easy access	ψ34.73	2004-01-27
	and study in a rapid-fire		
	question-and-answer format for		
	medical students on surgical		
	clerkships.		
MedRecall TM	MedRecall TM (Medicine Recall,	\$32.95	2004-01-27
	2nd Ed.)Written primarily for	402.00	
	third and fourth year medical		
	students, it covers the core		
	clinical specialty areas within		
	internal medicine.		
Healthy Living in the 21st	Why all the fuss about diet and	freewar	2004-01-27
Century	exercise? The majority of adults	e	
_	are overweight or obese. The		
	prevalence of overweight adults		
	has increased from 31% to 64%		

Name	Description	Cost	Date Added
	in the last four decades. The		
Personal Health & Diet	Full Desktop & Pocket PC	\$24.95	2004-01-27
<u>Manager</u>	Editions. Track all your health,		
	diet and fitness information. Full		
	diet and exercise tracker,		
	nutrition database, medical		
	records and much more.		
The Clinical Medicine	A medical reference text with	\$49.95	2004-01-27
<u>Consult</u>	detailed step-by-step procedures,		
	work-ups and treatments.		
<u>Procedures in Medicine</u>	A medical reference text with	\$16.95	2004-01-27
	detailed step-by-step procedures,		
	work-ups and treatments.		
APACHE2 (english	The APACHE II score is a	\$17.99	2004-01-27
version)	general measure of disease		
	severity based on physiologic		
	measurements and previous		
	health condition.		
APACHE2 (spanish	El APACHE II es uno de los	\$17.99	2004-01-27
version)	sistemas más empleados para		
	cuantificar la gravedad de un		
	paciente.		
RNotes TM	Anything you could ever need to	\$25.95	2004-01-27
	know for nursing school is all		
	right here in this clinical "need-		
	to-know" reference for		
	educators, students, and nurses.		
<u>WUCRheum™</u>	A practical guide to inpatient	\$39.95	2004-01-27
	and outpatient rheumatology		
	consultations.		
WashOnco TM	Written by expert contributors,	\$49.95	2004-01-27
	this hands-on resource provides		
	quick and reliable access to the		
	latest guidelines for cancer		
	management.		
NutrDx TM	The perfect rapid-access	\$59.95	2004-01-27
	resource for busy nutritionists		
	and dieticians and is ideally		
	suited for labs and clinical		
	rotations.	± .	
LNDG04 TM	Provides instant access to all the	\$44.95	2004-01-27
	drug information nurses need in		
	day-to-day practice.		
WUSSurg TM	Provides all the essential	\$29.95	2004-01-27
	information that every surgery		

Name	Description	Cost	Date Added
	intern needs from Day 1 on the		
WIJCDadaTM	wards.	\$20.05	2004 01 27
<u>WUSPedsTM</u>	Encapsulates the critical knowledge essential for a	\$29.95	2004-01-27
	successful pediatric residency.		
WUSOut TM	Provides all the essential	\$29.95	2004-01-27
	information that every intern	,	
	needs from Day 1 in the		
	outpatient clinic.		
<u>WUSOBGTM</u>	Provides all the essential	\$29.95	2004-01-27
	obstetrics and gynecology		
	information that every intern		
WUSNeuro TM	needs from Day 1 on the wards. Provides all the essential	\$29.95	2004-01-27
TI ODITORIO	information that every intern	ΨΔ7.73	2004 01-27
	needs from Day 1 on the wards,		
	including the neurologic history		
	and physical examination, a		
	neuroanatomy review and more.		
<u>WUCCardioTM</u>	This handy quick reference is a	\$39.95	2004-01-27
	pragmatic guide to the		
	pathophysiology, diagnosis, and		
	management of cardiovascular disease.		
MnlCrd5 TM	On the wards, on rounds, or at	\$49.95	2004-01-27
- Trimerae	the bedside, clinicians can	Ψ13.30	2001 01 27
	instantly access guidelines for		
	the immediate & long-term		
	medical & surgical management		
	of all cardiovascular disorders.	#2.40	2002 12 27
Calories Burned During	If you like exercise, you will like	\$3.49	2003-12-27
Sex	this program. If you loathe to exercise, you will love this		
	program!		
BMI Calculator	Calculate your body mass index	\$2.49	2003-12-27
	based on your height and weight.	Ţ <u>=</u> >	
CTDrugs for HPC2000	Drugs database tool for	\$5.00	2003-12-27
(ARM)	HPC2000.		
<u>Ultimate Drug Guide</u>	This drug reference remarkably	\$49.99	2003-12-27
	contains the entire content of the		
	Davis s Drug Guide, including		
Uandy nationts personal	integrated calculators.	\$198.0	2003-12-11
Handy patients personal edition (SH3)	Handy patients is a powerful and professional patient tracker for	\$198.0	2003-12-11
Cultion (5115)	PocketPC		
	POCKETPU		

Name	Description	Cost	Date Added
Handy patients	Handy patients is a powerful and	\$298.0	2003-12-11
professional Ed (SH3)	professional patient tracker for PocketPC	0	
Handy patients personal	Handy patients is a powerful and	\$198.0	2003-12-11
edition (Mips)	professional patient tracker for PocketPC	0	
Handy patients	Handy patients is a powerful and	\$298.0	2003-12-11
professional Ed (Mips)	professional patient tracker for PocketPC	0	
BP Tracker for Pocket PC	Tracks BP with Personal &	\$9.97	2003-12-11
<u>2000</u>	Doctor details. Graphical &		
	Statistical Comparison. HTML/Word/CSV Exports. 11		
	types of DateRanges to track BP,		
	Statistics & Export. For		
	Doctors/Patients.		
BP Tracker for Pocket PC	Tracks BP with Personal &	\$9.97	2003-12-11
2002	Doctor details. Graphical &		
	Statistical Comparison.		
	HTML/Word/CSV Exports. 11		
	types of DateRanges to track BP,		
	Statistics & Export. For		
DD Too sleep for Do sleet DC	Doctors/Patients. Tracks BP with Personal &	\$9.97	2003-12-11
BP Tracker for Pocket PC 2003	Doctor details. Graphical &	\$9.97	2003-12-11
2003	Statistical Comparison.		
	HTML/Word/CSV Exports. 11		
	types of DateRanges to track BP,		
	Statistics & Export. For		
	Doctors/Patients.		
<u>CommDisTM</u>	The first text on communicable	\$36.20	2003-12-11
	diseases and infection control		
	designed specifically for the pre		
TD TM	hospital care provider.	#20.20	2002 12 11
<u>TerrRespTM</u>	This reference provides the basic	\$20.20	2003-12-11
	information necessary for every emergency responder when		
	combating terrorism.		
PktEMT TM	This handy reference provides	\$30.67	2003-12-11
	easy access to the vital	, , · · ·	
	emergency information needed		
	by prehospital personnel.		
<u>PktRespTM</u>	A must-have for every EMT-B	\$20.00	2003-12-11
	and First Responder.		
PainOrigin TM	This reference is about the first	\$39.50	2003-12-11

Name	Description	Cost	Date Added
	unifying law of Pain that explains the origin of all types of pain.		
PHRnDGTM	A standard resource for nurses, this unique reference provides safe, effective, current, and accurate drug administration information right on your PDA.	\$49.95	2003-12-11
WMDCare TM	The only text on this subject written by EMS providers for EMS providers, this is a comprehensive, up-to-date treatment of a rapidly emerging field.	\$28.40	2003-12-11
WUCImmu™	This handy quick reference outlines current concepts and practice guidelines in the rapidly evolving fields of allergy, asthma, and immunology.	\$39.95	2003-12-11
EngSpan TM	This handy PDA reference presents English and Spanish translations of all medical terms and phrases used in clinician-patient interactions.	\$34.95	2003-12-11
HbDxTests™	Up-to-the-minute information on all current diagnostic procedures is just a click away.	\$41.95	2003-12-11
RNDxTests TM	Used by nursing students at all levels as a textbook in theory classes for integrating laboratory and diagnostic data and in clinical settings as a quick reference.	\$43.95	2003-12-11
Red Book TM	The indispensable one-stop guide to preventing, controlling, and managing infectious diseases in children.	\$99.95	2003-12-11
<u>PPEndo™</u>	Features a comprehensive compendium of endocrine drugs, laboratory values, and diagnostic tests.	\$49.95	2003-12-11
ApplTher TM	Includes a comprehensive scope of areas as they relate to drug information, and covers such topics as dermatology,	\$55.00	2003-12-11

Name	Description	Cost	Date Added
	psychiatry, oncology, drug		
	abuse, and more.		
5mVetEq TM	Provides concise, practical, up-	\$94.00	2003-12-11
	to-date information on almost all		
	diseases and clinical problems in		
	equine		
<u>smartVenus</u>	A personal ovulation calendar	\$10.00	2003-12-11
	and family planning tool for		
	women		
ARTbeat by Skyscape	ARTbeat, Skyscapes new FREE	freewar	2003-12-11
	intelligent mobile offering	e	
Track Ur BP for Pocket PC	Track Ur BP,tracks BP with	\$5.95	2003-12-11
2002 devices	Personal & Doctor details.		
	Graphical & Statistical		
	Comparison. HTML/Word		
	Exports. 11 types of DateRanges		
	to track BP, Statistics & Export.	.	
Track Ur BP for PocketPC	Track Ur BP,tracks BP with	\$5.95	2003-12-11
2000 Devices	Personal & Doctor details.		
	Graphical & Statistical		
	Comparison. HTML/Word		
	Exports. 11 types of DateRanges		
	to track BP, Statistics & Export.		
Track Ur BP for PocketPC	Track Ur BP,tracks BP with	\$5.95	2003-12-11
2003 devices	Personal & Doctor details.		
	Graphical & Statistical		
	Comparison. HTML/Word		
	Exports. 11 types of DateRanges		
N. 1.G. PDG 2002/2002	to track BP, Statistics & Export.	0	2002 12 11
Med-Score PPC 2002/2003	Analiza crítica y objetivamente	freewar	2003-12-11
N. 1.G. PRG 2000	las publicaciones médicas.	e	2002 12 11
Med-Score PPC 2000	Analiza crítica y objetivamente	freewar	2003-12-11
Clinical Dulmanus Land DC	las publicaciones médicas.	e •0.00	2002 12 11
Clinical Pulmonology PC	A medical reference text with	\$9.99	2003-12-11
	detailed step-by-step procedures,		
Classow (seesaish	work-ups and treatments.	£	2002 12 11
Glasgow (spanish version)	Calcula rápidamente la escala de	freewar	2003-12-11
	coma de glasgow en los	e	
Glasgow (anglish consists)	pacientes neurológicos.	freewar	2002 12 11
Glasgow (english version)	Calculate the Glasgow coma		2003-12-11
5MCC4TM	score in neurology.	e \$64.95	2003-12-11
<u>5MCC4™</u>	A comprehensive and structured clinical resource that is one of	Φ04.93	2003-12-11
	the most respected sources of information for medical		
	information for medical		

Name	Description	Cost	Date Added
	disorders.		
ER Basics	An on-the-job guide for those working in an adult Emergency Department	\$20.00	2003-12-11
Handy patients upgrade to prof edition	The upgrade from the personal edition to the professional one	\$100.0 0	2003-11-13
Handy patients prof edition (Arm)	Handy patients is a powerful and professional patient tracker for PocketPC	\$298.0 0	2003-11-13
Handy patients personal edition (Arm)	Handy patients is a powerful and professional patient tracker for PocketPC	\$198.0 0	2003-11-13
RN Assistant for PPC 2003 OS	The RN Assistant is your companion for everyday duty with customizable medical resource information.	\$14.95	2003-11-13
RN Assistant for PPC 2000, 2002 OS	The RN Assistant is your companion for everyday duty with customizable medical resource information.	\$14.95	2003-11-13
Diet Tracker PPC	Diet Tracker - its the easiest way to lose weight fast. This powerful and comprehensive weight loss program will help you beat the calorie temptation, containing an extensive 6000 item food database.	\$9.00	2003-11-08
Mediacl Reference (ARM)	A knowledge pack tool for Doctors / Medicine Students. All medical related abbrevations are listed.more than 12000 collection of data.	\$9.99	2003-11-08
Cancer-Diabetes Medical Reference (ARM)	A Knowledge pack Reference utility for Pocket pc. Covers 10000 + Terms & Detailed Definitions, and A-z of Cancer, Diabetes, General Medical Terms. A Handy useful medical tool to Students, Doctors.	\$19.99	2003-11-08
Diet and Health Calculator	6 calculators:Calculate Calorie Burned, Basal Metabolic Rate, Daily Calorie Needs, Target Heart Rate, Body Mass Index and Body Fat.	\$4.99	2003-11-08

Name	Description	Cost	Date Added
<u>Laboratory & Diagnostic</u>	LDT is the ideal reference for	\$43.95	2003-11-08
<u>Tests</u>	medical/nursing students,		
	physician and nurses. This easy-		
	to-consult product is useful as a		
	clinical tool as well as a		
	supportive text, with easy access		
	to information.		
Give Up Smooking (Pocket	A new tool to help you to give	\$1.95	2003-10-30
PC 2003)	up smoking!!	***	2002 10 20
MAMA for PPC2003	MAMA is a utility that organizes	\$59.95	2003-10-30
	your Medline Abstracts and		
	imports abstracts from Reference		
	Manager or EndNote to let you		
	view them offline anytime and		
File: Weight	anywhere. Record your weight data in the	\$6.50	2003-10-30
inc. weight	database. Make an overview of	ψυ.50	2005-10-50
	your weight about days and		
	month.		
Heybaby (for PocketPC)	Baby on the way? Track your	\$19.95	2003-10-30
	preganancy, daily info., baby	4-27.5	
	names and more with Heybaby!		
	FREE Trial		
<u>DxPregTM</u>	Instantly access reliable,	\$59.95	2003-10-30
	practical information on over		
	1,000 pharmaceuticals and		
	natural products that may be		
	used by pregnant or lactating		
	women.		
<u>WUSOtolTM</u>	All the essential information that	\$29.95	2003-10-30
	every intern needs from Day 1		
	on the wards, including an		
	overview of the residency, a		
	breakdown of common floor		
	calls, consults, a typical daily		
LMNPPr TM	routine and more. This PDA resource provides	\$39.95	2003-10-19
TIMINI I I	step-by-step guidelines for more	ゆうフ.ブン	2003-10-19
	than 100 procedures in all areas		
	of nursing practice and contains		
	many color images.		
Cancerous Substance	It appears that cancerous	\$4.99	2003-10-19
	substance is real and something		
	you will want to avoid. We have		
	compiled a list of the major		

Name	Description	Cost	Date Added
	Cancerous and Noncancerous		
	Substance.		
WUSPsych™	This handy guide is a quick	\$29.95	2003-10-10
	reference for the hospital		
	practice of psychiatric medicine		
	in the inpatient psychiatric,		
	consultation, and emergency		
	settings.		
Diabetes in Primary Care	Ultimate Diabetes PDA guide	\$24.99	2003-10-10
<u>2003</u>	for healthcare providers		
MySportTraining Food	The perfect extension to	\$4.95	2003-09-24
	MySportTraining to track your		
	food and maintain a balanced		
	diet.		
1st Aid & Emergencies	Emergencies can happen	freewar	2003-09-24
<u>(4ARM)</u>	everyday.	e	
1st Aid & Emergencies	Emergencies can happen	freewar	2003-09-24
(SH3)	everyday.	e	
1st Aid & Emergencies	Emergencies can happen	freewar	2003-09-24
(MIPS)	everyday.	e	
1st Aid & Emergencies	Emergencies can happen	freewar	2003-09-24
(ARM)	everyday.	e	
PsychPharm TM	This comprehensive clinical	\$59.00	2003-09-16
	guide emphasizes practical		
	advice—i.e., specific		
	recommendations about dosing,		
	titration, and combining		
	medications		
Give Up Smooking (Pocket	A new tool to help you to give	\$5.95	2003-09-16
<u>PC 2000)</u>	up smoking!!		
Give Up Smooking	A new tool to help you to give	\$5.95	2003-09-16
	up smoking!!		
NDH04 TM (Nursing2004	Up-to-the-minute information on	\$44.95	2003-09-15
<u>Drug Handbook)</u>	over 1,000 generic and 3,500		
	brand-name drugs is just a click		
	away with Nursing2004 Drug		
	Handbook for PDA.	+ -	
PktEM TM (Pocket	Pocket Emergency Medicine for	\$39.95	2003-09-15
Emergency Medicine)	PDA gives house staff and		
	medical students instant access		
	to the essential information they		
	need for patient care in the		
	emergency department.	.	
NHerbal04 TM	Nursing2004 Herbal Medicine	\$41.95	2003-09-15
	Handbook for PDA provides		

Name	Description	Cost	Date Added
	instant access to current, reliable		
	information for more than 300		
	herbal remedies used by patients.		
<u>PocketRx</u>	A prescription manager and	\$24.95	2003-09-03
	medical organizer with		
	medication reminders and more		
Medical Chart Plus for	All in ONE. This program	\$59.95	2003-09-03
<u>PPC 2003 OS</u>	combines patient database and		
	comprehensive Medical Chart.		
	Generate and print report. No		
	desktop companion needed.		
	Fully customizable. Includes 16		
D C 1 D C DDC	entry forms.	Φ140 7	2002 00 02
Drug Calc Pro for PPC	4 in ONE. 1. Comprehensive IV	\$14.95	2003-09-03
<u>2003</u>	calc with Rx, s/e, dosage 2.		
	Major drug formulas for easy		
	calc 3. Abbreviations 4. Conversions		
Handy HealthCare for	Take care of your health by	\$9.99	2003-09-03
PPC2003	tracking daily food intake and	\$9.99	2003-09-03
<u>FFC2005</u>	physical exercises.		
Pocket Guide to	From the editors of Websters	\$17.95	2003-08-27
Medications (SH3)	New World(TM) Medical	\$17.93	2003-06-27
Wedleations (S113)	Dictionary: a drug guide to the		
	most popular U.S. medications		
Pocket Guide to	From the editors of Websters	\$17.95	2003-08-27
Medications (MIPS)	New World(TM) Medical	Ψ17.73	2003-00-27
wiedledions (Will 5)	Dictionary: a drug guide to the		
	most popular U.S. medications		
Handy Health Care	Take care of your health by	\$12.99	2003-08-27
1101101	tracking daily food intake and	Ψ12.>>	2002 00 27
	physical exercises.		
Archimedes TM - Free	A must have for every medical	freewar	2003-08-27
Medical Calculator	professional! An innovative	e	
	specialty calculator, Archimedes		
	is unlike any other program		
	currently available		
<u>.911TM</u>	.911 TM - FREE Emergency	freewar	2003-08-23
	Responder Resource	e	
Health Tracker for	A complete health care tool to	\$12.95	2003-08-23
PocketPC2003	keep track the health history of		
	your family.Free Lifetime		
	Updates		
PocketBFL:Body-for-LIFE	Never before application on	\$19.99	2003-08-23
<u>Companion</u>	Body-for-LIFE		

Name	Description	Cost	Date Added
Health Tracker for	A complete health care tool to	\$12.95	2003-08-13
PocketPc2003	keep track the health history of		
	your family.Free Lifetime		
	Updates		
PDH10 TM	Alphabetically organized	\$49.95	2003-08-13
	monographs on more than 1,000		
	generic and 3,000 trade name		
	drugs.		
Pocket Guide to	From the editors of Websters	\$17.95	2003-08-13
Medications (ARM)	New World(TM) Medical		
	Dictionary: a drug guide to the		
	most popular U.S. medications		
DietMax for Pocket PC	10 Vital Measurements to	\$5.00	2003-08-13
2003	analyze your Health & Fitness		
	with detailed Specification.		
	Supports both Imperial & Metric		
	forms of Calculation. A		
	complete Health Care & Fitness		
	Package.		
<u>Diabetics Pocket Insulin</u>	The most complete diabetes	\$34.95	2003-08-06
<u>Manager</u>	management system for the		
	Pocket PC! Track blood glucose		
	levels, meals (calculate bolus		
	values), basal rates, exercise,		
	comments, and more		
Bones for Pocket PC	Bones uses extensive graphics	\$19.99	2003-08-06
	with pictures of all major bones		
	with processes and common		
	fractures demonstrated.		
<u>GlucoControl</u>	GlucoControl is a Free PDA	freewar	2003-08-06
	software (Pocket PC), that helps	e	
	to control the glucose levels in		
	blood, it replaces the classic		
	diabetes notebook.		
i-Health for PocketPC	i-Health is an utility for the	\$2.00	2003-08-06
2003	pocketpc users to make them fit		
	by calculating their		
	BMI,BFP,Ideal Weight etc.		
<u>Shots 2003</u>	Shots 2003 is a quick reference	Freewa	2003-07-24
	guide to the 2003 Childhood	re	
	Immunization Schedule, a		
	collaboration of the Advisory		
	Committee on Immunization		
	Practices (ACIP), the American		
	Academy of Pediatrics (AAP)		

Name	Description	Cost	Date Added
	and the American Academy of		
	Family Physicians (AAF		
NeoFax Pocket PC	2003 Edition of Neofax in a	\$59.95	2003-07-24
	Pocket PC Application		
<u>NpFamily™</u>	This new text/reference is	\$59.95	2003-07-23
	designed to help nurse		
	practitioner students learn how		
	to effectively manage patients		
MGHNeuro TM	across the life span. Neurology, neurosurgery, and	\$39.95	2003-07-23
WOTTNeuro	internal medicine residents and	\$39.93	2003-07-23
	practitioners will find this PDA		
	an essential reference for their		
	day-to-day practice.		
IMonCall TM	A concise, portable reference	\$44.95	2003-07-23
	that focuses on the evaluation		
	and treatment of over 60 of the		
	most common internal medicine		
	on-call problems.		
<u>5mHerbal™</u>	Provides instant access to	\$69.95	2003-07-23
	reliable information on herbs,		
	minerals, vitamins, amino acids,		
	probiotics, enzymes, over-the-		
	counter hormones, and other		
	dietary supplements commonly		
HerbalIx TM	used by consumers.	\$69.95	2003-07-23
Herbanx	Allows health professionals to answer consumers questions	\$69.93	2003-07-23
	regarding safety issues		
	concerning possible drug-herb		
	and drug-food interactions.		
<u>CrdBrdRevTM</u>	This highly focused question-	\$79.95	2003-07-23
	and-answer review is geared		
	specifically to candidates taking		
	the Cardiovascular Boards and		
	the Cardiovascular section of the		
att. P. St.	Internal Medicine Boards.		2002.05
Clin-eRx TM	This quick access guide covers	\$19.95	2003-07-23
	more than 900 of the most		
AW Diotionary of	commonly used medications.	\$9.95	2003-07-23
AW Dictionary of Sexology Terms	Dictionary of Sexology Terms with 693 entries.	\$9.93	2003-07-23
ER Coding and Billing	ER Coding and Billing Wizard	\$39.99	2003-07-23
Wizard	(ERCBW) is an important tool	φ33.77	2003-07-23
11 12414	and resource for Physicians,		
<u>L</u>	and resource for ringsicians,	<u> </u>	

Name	Description	Cost	Date Added
	PA's and NP's that work in the		
D	Emergency Department.	Φ20.05	2002 07 10
Pregnancy To the Program of the Prog	Helps moms-to-be keep track of	\$29.95	2003-07-19
Tracker/PocketPC 2002	their progress during pregnancy.	\$4.05	2002 07 10
U.S. Army body fat % Calculator	Simple tool to calculate Body Fat % according to U.S. Army	\$4.95	2003-07-19
Carculator	stds set forth in AR 600-9.Even		
	notifies your Overweigt status		
	and amount of Body Fat to		
	reduce.Save and load		
	measurements.		
Paramedics Toolbox for	Award Winning Task Specific	\$34.99	2003-07-08
Pocket PC	Modules for Pre-Hospital		
	Providers.	40	
2003 World Almanac -	Become an "Instant Reference	\$9.95	2003-07-08
Consumer Info	Expert" on Consumer Info with		
	the 2003 World Almanac - Consumer Info & Health.		
DietMax for PPC2002	10 Vital Measurements to	\$3.40	2003-07-08
Dictivitax for 11 C2002	analyze your Health & Fitness	ψ5.40	2003 07 00
	with detailed Specification.		
	Supports both Imperial & Metric		
	forms of Calculation. A		
	complete Health Care & Fitness		
	Package.	+	
<u>DietMax</u>	10 Vital Measurements to	\$3.40	2003-07-08
	analyze your Health & Fitness with detailed Specification.		
	Supports both Imperial & Metric		
	forms of Calculation. A		
	complete Health Care & Fitness		
	Package.		
Doktop	Drugs database, medical news	freewar	2003-07-08
	and other useful informations for	e	
D 01.5	Polish doctors.	01407	2002.05.00
Drug Calc Pro	4 in ONE. 1. Comprehensive IV	\$14.95	2003-07-08
	calc with Rx, s/e, dosage 2.		
	Major drug formulas for easy calc 3. Abbreviations 4.		
	Conversions		
Shots 2003	Shots 2003 is a quick reference	freewar	2003-07-08
	guide to the 2003 Childhood	e	
	Immunization Schedule and		
	other immunization schedules.		
2003 World Almanac -	Become an "Instant Reference	\$9.95	2003-06-17

Name	Description	Cost	Date Added
Consumer Info	Expert" on Consumer Info with the 2003 World Almanac -		
	Consumer Info & Health.		
Paramedics Toolbox for	Award Winning Task Specific	\$34.99	2003-06-17
Pocket PC	Modules for Pre-Hospital Providers.		
Immunizations	Medical Pocket PC Freeware	freewar e	2003-06-16
OB Wheel	OB Wheel includes calculators	freewar	2003-06-16
	for: gestational age (based on EDC, LMP, and US), Bishop	e	
	Score, and helps you determine		
	when a patient will reach a goal age		
<u>DietRef</u>	DietRef is a daily weight and	\$9.99	2003-06-13
	calorie tracking program. Plot		
	graphs of your weight and calories over time, and view		
	your weight loss stats. Also		
Health Tracker	includes BMI and caloric calc. A complete health care tool to	\$9.99	2003-06-04
TICATUI TTACKCI	keep track the health history of	\$7.77	2003-00-04
	your family.Free Lifetime Updates		
Health Tracker for	A complete health care tool to	\$9.99	2003-06-04
<u>PPC2002</u>	keep track the health history of your family. Free Lifetime		
	Updates		
AJCC-TNM TM	Brings together all currently	\$69.95	2003-06-02
	available information on staging of cancer		
RN CrashCart for Pocket	A Pocket Pc program for Nurses.	\$20.00	2003-05-21
<u>Pc</u>	Drug and IV calculations of all kinds, EKGs, Assessments,		
	English to Spanish medical		
	terms, and Conversions.		
IV DripCalc	IV Drip Calculations for Nurses. Also checks an ongoing Drip to	\$10.00	2003-05-21
	see if the pt. is getting the right		
	dose.Other Tools include		000000000000000000000000000000000000000
GlucoControl	GlucoControl is a Free PDA software (Pocket PC), that helps	freewar e	2003-05-21
	to control the glucose levels in	E	
	blood, it replaces the classic		
	diabetes		

Name	Description	Cost	Date Added
	notebook.http://glucocontrol.und		
	ersociety.com/eng/		
Student tcmDiag	Complete Traditional Chinese	\$24.99	2003-05-21
	Medical (TCM) Zang-Fu Pattern		
	diagnosis reference. Includes		
	Acupuncture, Formula, Western,		
	Etiology, etc. sections		
BioChem 1stRespondER	BioChem 1stRespondER is	\$18.95	2003-05-21
	designed to help healthcare		
	professionials deal with		
	chemical and biological warfare		
	attacks. Lists first aid, ER care,		
	lab tests, etc.		
WMD SWAG	WMD SWAG quickly analyzes	\$24.95	2003-05-21
	your observations at a disaster		
	site and provides a fast,		
	scientific guess of which agents		
	of mass destruction are most		
0. 3.00	likely involved.	, •	2002 05 00
OmniMD.com	OmniMD is a Pocket PC based	negotia	2003-05-08
	and Internet enabled Electronic	ble	
	Medical Record System		
	(EMRS), Medical Transcription,		
	Document Management, Charge		
	Capture and Scheduling		
	solution. The system is HIPAA		
	compliant and wireless capable.		
Madical Approaches	OmniMD reduces paperwork Free medical textbook	Етарууа	2003-05-08
Medical Approaches	Free medical textbook	Freewa	2003-03-08
Madical Chart Plus	This program combines patient	s59.95	2003-05-06
Medical Chart Plus	database and comprehensive	\$39.93	2003-03-00
	medical chart. You're able		
	generated and print report in a		
	matter of seconds. Fully		
	customizable. Includes 16 entry		
	forms.		
Glucopad	THE INTELLIGENT	\$19.99	2003-05-06
<u>отигории</u>	DIABETES MANAGMENT	Ψ1/.//	2005 05 00
	SYSTEM - Remember we are		
	"Built By Diabetics For		
	Diabetics"		
tcmDiag	Complete Traditional Chinese	\$54.99	2003-04-15
	Medical (TCM) Zang-Fu Pattern	7	
	diagnosis reference. Includes		
		l .	

Name	Description	Cost	Date Added
	Acupuncture, Formula, Western,		
C : 11 4 4 9	Etiology, etc. sections	Φ10 00	2002 04 00
Surgical knots, sutures & stitches notes	Everything you need to know on closing wounds. Information on	\$10.00	2003-04-09
<u>stitches notes</u>	wounds, sutures, needles and		
	knots. Includes over 20 pictures		
	illustrating the different types of		
	sutures/needles/knots/techniques		
Orthopedic surgery notes	Information on the diagnostic	\$20.00	2003-04-09
	and the pathophysiology of a		
	wide array of conditions related		
	to the musculo-skeletal system. It also covers surgical techniques		
	and approaches of orthopedic		
	procedures.		
<u>Infectious diseases notes</u>	A complete reference about	\$39.99	2003-04-09
	infectious diseases,		
	microbiology and antimicrobials		
Town with The Medical	in the palm of your hand.	¢2.00	2002 04 05
Terrorism: The Medical Response	A medical reference text.	\$3.99	2003-04-05
MyCarbJournal	Maintain a journal of the	\$9.95	2003-04-02
	carbohydrates you eat in a day.	4,,,,	
	Keep track if you fall into the		
	desired range.		
SOFMH& TM	Full of practical emergency	\$64.95	2003-04-02
	information about coping with		
	any kind of medical emergency		
RnNDH TM (Nursing Drug	in less than optimum situations. Key drug information is just one	\$44.95	2003-04-02
Handbook)	click away now that this best-	ψ 11 .73	2003-04 - 02
	selling drug handbook for nurses		
	is available for PDAs.		
<u>IdentADrugTM</u>	Ident-A-Drug gives you quick	\$39.50	2003-04-02
	accurate identification of		
D IVID TM	medications.	0.41.07	2002.04.02
<u>RnIVDrugsTM</u>	Crucial details that make safe	\$41.95	2003-04-02
	and effective administration of I.V. drugs possible are now just		
	one tap away!		
SignsSx TM	This authoritative handbook	\$41.95	2003-04-02
	helps in recognizing patient	+ · - • > •	
	signs and symptoms, linking		
	them to their most probable		

Name	Description	Cost	Date Added
	causes, and putting them in		
	context with associated findings.		
OncoMd TM	This practical handbook is an	\$69.95	2003-04-02
	up-to-date guide to all aspects of		
	cancer chemotherapy.		
<u>OncoRnTM</u>	This nursing handbook provides	\$49.95	2003-04-02
	a complete overview of the		
	management of patients with		
ED	cancer.	Φ 2.4 .00	2002 02 25
E-Run	electronic patient care report for PPC	\$24.99	2003-03-25
Heart	HEART calculates your training	\$9.95	2003-03-14
	heart rate in 5 zones, using 3	Ψ3.36	2002 02 11
	methodsANDit computes		
	your resting heart rate!		
KnowPlaces - Human	An interactive guide to Human	\$5.00	2003-03-14
Body	Body. Now you can find your		
	way around the body!		
NaturalDB TM	Natural Medicines	\$92.00	2003-02-28
	Comprehensive Database gives		
	you everything you want to		
	know about herbs, vitamins,		
	minerals and supplements.		
Pocket Shrink [ARM]	Stressed? Need a shrink? Or	\$4.95	2003-02-28
	maybe just someone to talk to?		
	Pocket Shrink is the answer! A		
	fun way to help you relieve		
	stress, analyze your problems,		
e-pill PillPAL Medication	and pass the time. Medication Reminder and	\$49.95	2003-02-28
Reminder	Patient Adherence History	\$49.93	2003-02-28
Kemmaer	Program		
GlucoControl	GlucoControl is a Free PDA	freewar	2003-02-24
	software (Pocket PC), that helps	e	
	to control the glucose levels in		
	blood, it replaces the classic		
	diabetes notebook.		
<u>EssentialsDxTM</u>	From Lange, "nutshell"	\$44.95	2003-02-16
	information on the diagnosis and		
	management of 500 medical		
	disorders, for use on the wards		
	and in the clinic.		
<u>Procedures in Medicine-PC</u>	A medical reference text with	\$9.99	2003-02-16
	detailed step-by-step prodedures.		
<u>GetFit</u>	Track your workouts and watch	\$10.00	2003-02-16

Name	Description	Cost	Date Added
	your progress.		
Wound & Skin Infections-	A medical reference text with	\$3.99	2003-02-04
<u>PC</u>	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
Travel Medicine	A medical reference text with	\$3.99	2003-02-04
	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
Camping First Aid for	Plan to go for Camping? Be	\$5.95	2003-02-04
PPC2002	Secure on your Journey! Buy	,	
	Camping First Aid Today, a		
	essential Kit for every		
	Tourist, Travellers and		
	Adventurers.		
5mPeds3 TM	This best-selling reference is	\$69.95	2003-02-04
	designed for quick consultation	Ψ 0 > 1, > 0	2002 02 0 .
	on problems seen in infants,		
	children, and adolescents.		
BMI & Target Heart Rate	BMI & Target Heart Rate	\$1.50	2003-01-23
calculator	Calculator is an application to	Ψ1.50	2003 01 23
<u>ouroundror</u>	calculate BMI & Target Heart		
	Rate.		
Health Care	Health Care is tools make easy	\$3.59	2003-01-23
Trouter Care	for you to use check and	Ψ3.09	2003 01 23
	diagnose your health		
	measurements to reliably assess		
	and improve your health and		
	fitness.		
emHealth Calculator for	A Very userful tool to make sure	\$19.95	2003-01-23
Pocket PC	you are FIT. We have provided	Ψ17.70	2005 01 25
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	CHECK LIST for you to refer		
	and take appropriate action!		
emHealth Calculator for	A Very userful tool to make sure	\$22.95	2003-01-23
Pocket PC 2002	you are FIT. We have provided	Ψ22.73	2005 01 25
10000102002	CHECK LIST for you to refer		
	and take appropriate action!		
<u>StedmansTM</u>	Get quick access to thousands of	\$49.95	2003-01-23
Steamans	medical terms, drug names,	ψ ().)	2003 01-23
	eponyms, procedures and		
	protocolsall at the touch of		
	your stylus!		
RnHerbal TM	Now you can protect your	\$41.95	2003-01-23
KIII CI Val	Trow you can protect your	Φ1.73	2003-01-23

Name	Description	Cost	Date Added
	patients more completely with		
	the first herbal medicine guide		
	exclusively for nurses!		
Acid-Base and Blood Gas	The Acid-Base and Blood Gas	\$29.99	2003-01-23
<u>Interpreter</u>	Interpreter is the state-of-the-art		
	application designed to facilitate		
	the evaluation of acid-base,		
	blood gas and electrolyte values.		
<u>PocketIRIS</u>	PocketIRIS is a mobile medical	\$225.0	2003-01-08
	visualization and communication	0	
	software, which enables display		
	and analysis of full-fidelity		
	DICOM images on handheld		
	devices.		
Verulox Medication	Verulox Medication Reminder	\$2.95	2003-01-01
Reminder	allows you to create prescription		
	medication schedules on your		
	Pocket PC. Now you do not have		
	to worry about remebering to		
	take your medications.		
<u>WomanCalendar</u>	Assistant in biorhythmic and	\$9.99	2002-12-18
	contraception planning. Zodiac		
	and Chinese signs.		
Camping First Aid	Plan to go for Camping? Be	\$4.95	2002-12-18
	Secure on your Journey! Buy		
	Camping First Aid Today, a		
	essential Kit for every Tourist &		
	Travellers.		
NelsonABX TM	The most popular and widely	\$29.95	2002-12-18
	used pocket reference on		
	pediatric antimicrobial therapy.		
<u>GlucoControl</u>	GlucoControl es una utilidad	freewar	2002-12-06
	para PDA's (Pocket PC), que	e	
	permite llevar el control de los		
	niveles de glucosa en sangre,		
	substituyendo la clásica libreta		
*** 1 * 1 ***	de autocontrol del diabético.	0.40.0 7	2002 11 22
<u>WashAmb™</u>	Designed for practitioners who	\$49.95	2002-11-28
	are dealing with ambulatory care		
	of adult patients.	#1400	2002 11 22
Stop Smoking! (ARM)	Stop Smoking, a HandHeld	\$14.99	2002-11-28
	based application to quit		
	smoking. Users can quit without		
	the use of drugs, patches or gum		
	and without the symptoms of		

Name	Description	Cost	Date Added
	depression, withdrawal, and		
	anxiety.		
Metric Diet Calculator for	Want to be fit and smart? Want	\$7.95	2002-11-28
2002	to update your control over the		
	diet and improve your fitness		
Metric Diet Calculator	level, then try this. Want to be fit and smart? Want	\$4.95	2002-11-28
Metric Diet Calculator	to update your control over the	\$4.93	2002-11-28
	diet and improve your fitness		
	level, then try this.		
Imperial Diet Calculator	Want to be fit and smart? Want	\$7.95	2002-11-27
for 2002	to update your control over the	Ψ7.50	2002 11 27
	diet and improve your fitness		
	level, then try this.		
Imperial Diet Calculator	Want to be fit and smart? Want	\$4.95	2002-11-27
	to update your control over the		
	diet and improve your fitness		
	level, then try this.		
Acid-Base and Blood Gas	The Acid-Base and Blood Gas	\$29.99	2002-11-27
<u>Interpreter</u>	Interpreter is designed to		
	facilitate the evaluation of acid-		
	base and blood gas values, as well as electrolyte analysis.		
PktMed TM	A handy summary of key	\$37.95	2002-11-27
<u>I KUVICU</u>	clinical information covering the	Ψ31.73	2002-11-27
	major topics in the basic areas of		
	internal medicine.		
DRUGology TM	DRUGology is a source	\$19.95	2002-11-27
(DRUGology Handbook)	designed for primary care health		
	providers, residents and medical		
	students so that they may have a		
	quick reference to treat a wide		
C 1 (P 1 N 1	variety of conditions.	010.05	2002 11 25
Guide to Popular Natural	A guide to the most popular	\$19.95	2002-11-27
Products Applicate (APM)	herbal products.	\$29.99	2002-11-27
AcuPoints (ARM)	Acupuncture Software for Professionals & Students. Point	\$29.99	2002-11-27
	location, Clinic Notes section,		
	Treatments, etc.		
RNPsych TM	This concise, quick reference	\$40.95	2002-11-15
	handbook will help prepare		
	students and nurses for common		
	psychosocial and psychiatric		
	problems that can coincide with		
	patients' medical problems.		

Name	Description	Cost	Date Added
RNDx∬ TM	This handy pocket guide helps	\$30.95	2002-11-15
	nursing students identify		
	interventions most commonly		
	associated with nursing		
	diagnoses when caring for		
	patients.		
HIVGuide™ (HIV Primary	Provides practical up-to-date	\$25.00	2002-11-15
<u>Care Guidelines</u>	recommendations on the		
	outpatient management of HIV		
	disease.	***	
I Ching for Pocket PC	This program helps you finding	\$10.00	2002-11-15
(ARM)	answers to vital matters by using		
	the ancient Chinese oracle I		
N. D.	Ching (Book of Changes).	Φ24.00	2002 11 15
Nurse Pro	Nursing patient tracking	\$24.99	2002-11-15
DDC Essana Name a large 31	software for PPC.	¢20.00	2002 11 00
PPC Emerg Nurse bundle	Bundle of two great applications,	\$29.99	2002-11-08
	PPC Emerg Nurse Reference Guide and Pocket EKG 2002.		
PPC EMS bundle	Bundle of two great applications,	\$29.99	2002-11-08
PPC EWIS buildle	PPC EMS Field Guide and PPC	\$29.99	2002-11-08
	EKG 2002.		
Pocket PC 2002	A very handy due date calculator	\$9.99	2002-11-08
PregWheel	/PregWheel for Pocket PC 2002	Ψ7.77	2002-11-00
<u>Tregwheer</u>	devices.		
Street Drugs for PPC 2002	Learn the Dope on Dope with	\$14.99	2002-11-08
	this Street Drug/Slang database.	4 - 117	
Pocket EKG 2002	Pocket PC 2002 EKG reference	\$19.99	2002-11-08
	software.	,	
PPC Emerg Nurse	Emerg Nurse Pocket PC	\$19.99	2002-11-08
Reference Guide	reference guide.		
PPC EMS Field Guide	EMS Field Reference Guide for	\$14.99	2002-11-08
	Pocket PC 2002		
RNFastFacts TM	The most sought-after clinical	\$28.95	2002-11-08
	reference information for eight		
	nursing content areas all in one		
	convenient source.		
Pocket Primary Care	Pocket Primary Care provides	\$37.95	2002-11-08
	key points on common problems		
	seen in the ambulatory setting.		
RNAssess TM	A nursing assessment tool for all	\$32.95	2002-11-08
	age groups, with specialized		
	communication techniques for		
	clients of different ages and		
	cultural backgrounds.		

Name	Description	Cost	Date Added
<u>DrugIxTM</u>	Make better prescribing	\$49.95	2002-11-08
	decisions with this drug		
	interaction analyzer containing		
	over 3,000 brand names with		
	generic equivalents.		
BartlettHIVTM	This comprehensive reference	\$29.95	2002-11-08
	keeps you on top of the latest		
	guidelines for the care of HIV		
	patients.		
ABC's of Interpretive	Covers hundreds of common and	\$49.95	2002-11-08
Laboratory Data	uncommon laboratory tests.		
DOCPRINT3 +	Medical Note Generator, Printer,	\$19.99	2002-11-08
DOCCALC	and Calculator		
PointCalc (MIPS)	Great way to calculate and track	\$4.95	2002-10-31
	your daily diet points!		
PointCalc (SH3)	Great way to calculate and track	\$4.95	2002-10-31
	your daily diet points!	,	
MyDiet PRO for Pocket	A proven approach to weight	\$19.95	2002-10-31
PC and Windows	loss! Special Introductory		
	Savings!!!		
stethographics	medical software used for heart	\$350	2002-10-22
	and lung diagnosis		
PersonalTrainerPRO for	Your own Personal Trainer!	\$24.95	2002-10-18
PPC and Windows			
PharmD ToolBox	PharmD ToolBox is a	\$58.99	2002-10-18
	combination of 11 modules from		
	the Award Winning products		
	ER&ICU ToolBox and		
	PediSuite.		
Handy Sign	Signature Capture at anywhere	\$38.00	2002-10-10
Nutrition Journal	Crisho Nutrition Journal is a	\$12.99	2002-10-06
	complete diet and activity		
	tracker, with a nutritional and		
	exercise database that helps user		
	to successfully achieve weight		
	and/or health control programs.		
BioBody Personal Trainer	New! More flexibility for	\$29.99	2002-10-06
Edition	different exercise programs!		
	Track your food and workout		
	information. Powerful graphs		
	and views.		
Stedman's Concise	Stedman's Concise Medical	\$39.95	2002-10-06
Medical Dictionary	Dictionary has earned the		
	respect of demanding instructors		
	and students alike as a medical		

Name	Description	Cost	Date Added
	reference of both substance and concision for the health professions.		
MobileWoman for Pocket PC	Software bundle for the modern woman	\$34.95	2002-10-06
<u>SpeedyPharm</u>	Prontuario Farmaceutico	\$145.0 0	2002-10-06
Patient File	Patient management for the busy OB/GYN.	\$29.95	2002-10-06
Washington Manual of Surgery	The Washington Manual of Surgery, 3rd Edition, provides reliable guidelines and algorithms for management of surgical diseases.	\$49.95	2002-10-06
Johns Hopkins Manual of OBGYN	The perfect PDA reference for clinicians who deal with obstetric and gynecologic problems.	\$49.95	2002-10-06
Pocket Book of ID Therapy	Written by noted authority Dr. John Bartlett, this practical reference covers all relevant aspects of antibiotics.	\$29.95	2002-10-06
Fast Facts Orthopaedic Review	This orthopaedics refresher and study tool for the recertification exam is perfect for residents and practitioners.	\$49.95	2002-10-06
BreastSurgeon	A concise, common sense, clinically-oriented approach to breast disease.	freewar e	2002-10-06
Glass Lantern CalTrack	Track calories to lose or gain weight. Includes a USDA 6,000 food database!	\$34.95	2002-10-06
Quick Rounds®	Quick Rounds is the ultimate patient rounds tracking program. Keeps your ongoing rounds list with key info for clinical and billing efficiency. A must have for all physicians!	\$19.95	2002-10-06
DicomViewer	Viewer for Dicom, Jpeg and BMP files	19	2002-09-06
Pocket Health Pack for PocketPC2002	Upholding the health reports is simle now.Diabetes,Eyecare,BP & Asthma tracker are under Health Pack to mitigate you from the maintenance of health	33.95	2002-09-06

Name	Description	Cost	Date Added
	reports.		
PEPID PDC-Portable Drug Companion	A complete drug reference includes 1600 drug/herb/OTC monographs plus integrated dosing calculators, toxicology and more.	49.95	2002-08-21
PEPID PDC-PORTABLE DRUG COMPANION	A complete drug reference includes 1600 drug,herbals and OTC monographs plus integrated dosing calculators, toxicology and more.	49.95	2002-08-21
PEPID MSC-MEDICAL STUDENT COMPANION	PEPID MSC can help ensure your successful completion of each rotation!	89.95	2002-08-21
PEPID EMS-FOR PARAMEDICS AND EMT`S	Named one of the 21 'Hot Products 2002' by the Journal of Emergency Medical Services (JEMS).	89.95	2002-08-21
Pocket Medical Encyclopedia (MIPS)	Medical Encyclopedia for Pocket PC	49.95	2002-08-21
PEPID EMS-Software for Paramedics/EMT's	Named one of the 21 'Hot Products 2002' by the Journal of Emergency Medical Services (JEMS).	89.95	2002-08-21
PEPID RN-Clinical Nursing Software	The only comprehensive nursing software for nurses in every area of expertise!	89.95	2002-08-21
PEPID RN-CLINICAL NURSING SOFTWARE	The only comprehensive nursing software for nurses in all areas of expertise!	89.95	2002-08-21
PEPID MD-Software for All Physicians	Your complete, clinical consultincludes 1500 presentations, 1500 monographs, integrated dosing calculators and much more!	109.95	2002-08-21
PEPID MD-Software for All Physicians	Your complete, clinical consultincludes 1500 presentations, 1500 monographs, integrated dosing calculators and much more!	109.95	2002-08-21
PEPID ED-EMERG.MED PHYSICIAN SOFTWARE	Emergency physician decision support tool with 1500 disease and trauma presentations, 1500 drugs/herbs/OTC monographs,integrated	109.95	2002-08-21

Name	Description	Cost	Date Added
	calculations and much more!		
Pocket Medical	Medical Encyclopedia for	49.95	2002-08-21
Encyclopedia (ARM)	Pocket PC		
emHealth Quiz for	A unique way to test your	17.95	2002-08-21
PocketPC 2002	awareness and knowledge in		
	health related concepts. Get		
	ready for the quiz that's going to		
	test your knowledge to the full.		
emHealth Quiz	A unique way to test your	15.95	2002-08-21
	awareness and knowledge in		
	health related concepts. Get		
	ready for the quiz that's going to		
	test your knowledge to the full.		
PEPID ED-EMERG.MED	Emergency physician decision	109.95	2002-08-21
PHYSICIAN SOFTWARE	support tool. Includes 1500		
	disease and trauma		
	presentations, 1500		
	drugs/herbs/OTC monographs,		
	integrated dosing calculations		
	and much more!		
Pocket Health Pack	Upholding the health reports is	31.95	2002-08-21
	simle now.Diabetes,Eyecare,BP		
	& Asthma tracker are under		
	Health Pack to mitigate you		
	from the maintenance of health		
	reports.		
Clinical Allergy &	A medical reference text with	\$8.99	2002-08-19
Immunology-PC	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
Clinical Compendium	A medical reference text with	\$8.99	2002-08-19
	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions. Many		
	Alternative Medicine topics		
	covered.		
Clinical Pediatrics-PC	A medical reference text with	\$9.99	2002-08-19
	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
emPatient Info for Pocket	Finding difficult to keep track of	\$43.95	2002-08-19
PC 2002	patient details? Doctors, we help		

Name	Description	Cost	Date Added
	u to carry out your noble		
	profession in a more efficient		
	way with ease!		
emPatient Info	Finding difficult to keep track of	\$39.95	2002-08-19
	patient details? Doctors, we help		
	u to carry out your noble		
	profession in a more efficient		
Handbook of Fractures	way with ease! The ideal on the spot reference	\$59.95	2002-08-19
TIANGUOOR OF FIACTURES	for residents and practitioners	\$39.93	2002-00-19
	seeking fast facts on fracture		
	management.		
RNDiseases	The handheld version of	\$45.95	2002-08-19
<u> </u>	Diseases and Disorders: A	ψ.σ.σ	2002 00 19
	Nursing Therapeutics Manual is		
	a practical reference for all		
	nurses on the go!		
Wills Eye Manual & Drug	Complete opthomology resource	\$69.95	2002-08-19
<u>Guide</u>	including The Wills Eye Manual		
	and The Wills Eye Drug Guide.		
<u>PocketHealthToolsforPock</u>	Your family members list may	\$31.95	2002-08-19
<u>etPC2002</u>	be long, but, maintainence of		
	their health reports is as simple		
Discol (ID)	as a click.	Φ π ο r	2002 00 12
PointCalc (ARM)	Great way to calculate and track	\$7.95	2002-08-13
MAMA Con Double DC	your daily diet points! Medline Abstracts Mini	¢40.05	2002 00 12
MAMA for Pocket PC		\$49.95	2002-08-13
	Archiever is an offline organizer for your Medline abstracts so		
	you can view them anytime and		
	anywhere. It is highly		
	customizable to your preference.		
Diet Manager	Your handheld assistant in	\$19.95	2002-08-05
	healthy nutrition and sports!	,	
DueDateCalc/PocketPC200	Due Date (pregnancy)calculator	9.95	2002-07-26
<u>2</u>	for obstetric use.		
Clinical Cardiology-PC	A medical reference text with	\$9.99	2002-07-18
	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
N. Division on the t	medical conditions.		2002 07 10
New Dictionary of Medical	About 5000 terms with clear	freewar	2002-07-18
<u>Terms</u>	explanations of technical	e	
	terminology and technologies		
	used in the Medical field.		

Name	Description	Cost	Date Added
μ-Breath (MIPS)	Peak Flow Monitoring for	\$9.95	2002-07-18
	PocketPC		
μ-Breath (ARM)	Peak Flow Monitoring for	\$9.95	2002-07-18
	PocketPC		
Hospital Medicine	Your portable decision-support	\$49.95	2002-07-18
Essentials	tool for quick answers to more		
	than 210 clinical problems seen		
	in the inpatient setting.		
Evidence Based Critical	The handheld version of The	\$49.95	2002-07-18
Care	Handbook of Evidence Based		
	Critical Care Medicine provides		
	access to critical data in		
	therapeutic decision-making.		
Pocket Pediatrics	Pocket Pediatrics provides need-	\$37.95	2002-07-18
	to-know clinical information	·	
	most common to students and		
	residents in a hospital or		
	ambulatory setting.		
EyeCare for PocketPC2002	Eyes are everything for us, but	\$11.95	2002-07-13
	do we care to keep a vigil on	·	
	them continuously? This		
	application is exactly for that!		
Eye Care	Eyes are everything for us, but	\$9.95	2002-07-13
	do we care to keep a vigil on	******	
	them continuously? This		
	application is exactly for that !		
Pocket Fitness	Track your workouts and body	\$10.00	2002-07-13
	measurements. Add/delete		
	exercises as needed. Comapare		
	workouts to see your results.		
Personal Health & Diet	An easy way to track all your	\$24.95	2002-07-05
Manager	health, diet and fitness		
	information. Contains a full-		
	featured diet and exercise		
	manager, nutrition database,		
	medical records, daily journal		
	and more.		
Handy patients-PC	Handy patients-PC is the PC	\$28.00	2002-06-30
	version with powerful tools to		
	customize and superimpose		
	patients informations of your		
	PocketPC on scanned documents		
	of your service, then print.		
Psychiatric Drug Therapy	PsychD TM is the handheld	\$49.95	2002-06-30
	version of the Handbook of	·	
		l .	

Name	Description	Cost	Date Added
	Psychiatric Drug Therapy,		
	covering each of the major		
	classes of drugs used in current		
	psychiatric practice.		
Clinical Pulmonology-PC	A medical reference text with	\$9.99	2002-06-30
	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
Clinical Medicine Consult-	A medical reference text with	59.99	2002-06-20
PC	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
Clinical Infectious	A medical reference text with	9.99	2002-06-20
Diseases-PC	detailed work-ups, treatment		
	plans, medicines and		
	differentials for a myriad of		
	medical conditions.		
CosmoBio Conception	Whith CosmoBio you get a	10	2002-06-20
Control (ARM)	mobile tool for as well		
	conception and contraception.		
	You don't need no chemical		
	contraceptive any more.		
Clinical Rheumatology &	A medical reference text for	9.99	2002-06-20
Pain-PC	practicing clinicians to quickly		
	gather diagnostic, differentials,		
	work-ups, and detailed treatment		
	plans for a myriad of medical		
	conditions.		
Clincal Hematology-	A medical reference text for	9.99	2002-06-20
Oncology-PC	practicing clinicians to quickly		
	gather diagnostic, differentials,		
	work-ups, and detailed treatment		
	plans for a myriad of medical		
	conditions.		
Clinical Psychiatry-PC	A medical reference text for	9.99	2002-06-20
	practicing clinicians to quickly		
	gather diagnostic, differentials,		
	work-ups, and detailed treatment		
	plans for a myriad of medical		
	conditions.		
Clinical Gastroenterology-	A medical reference text for	9.99	2002-06-20
PC	practicing clinicians to quickly		
	gather diagnostic, differentials,		
	o	L	

Name	Description	Cost	Date Added
	work-ups, and detailed treatment plans for a myriad of medical conditions.		
Clinical Orthopedics-PC	A medical reference text for practicing clinicians to quickly gather diagnostic, differentials, work-ups, and detailed treatment plans for a myriad of medical conditions.	9.99	2002-06-17
ICU-Fluids-Electrolytes- Nutrition-PC	A medical reference text for practicing clinicians to quickly gather diagnostic, differentials, work-ups, and detailed treatment plans for a myriad of medical conditions.	9.99	2002-06-17
Dictionary of Medical Terms	More than 1300 terms with clear explanations of technical terminology and technologies used in the Medical field	freewar e	2002-06-17
Clinical Neurology-PC	A medical reference text for practicing clinicians to quickly gather diagnostic, differentials, work-ups, and detailed treatment plans for a myriad of medical conditions.	9.99	2002-06-17
Clinical Nephrology-PC	A medical reference text for practicing clinicians to quickly gather diagnostic, differentials, work-ups, and detailed treatment plans for a myriad of medical conditions.	8.99	2002-06-17
The Sages Manual	The handheld version of The Sages Manual is useful to anyone who needs quick access to information in general surgery.	64.95	2002-06-17
Pocket CPT	Your Pocket Procedure Code Manual	12	2002-06-17
Shopping List-Casio BE- 300	A shopping list with a difference, Nutrition Guide built in, view or record nutritional information.	\$8.99	2002-06-04
Pocket ICD	Your Pocket Diagnosis Code Manual	\$12.00	2002-06-04
Pocket ICD/CPT	Your Pocket	\$18.00	2002-06-04

Name	Description	Cost	Date Added
	Diagnosis/Procedure Code		
	Manual		
Free LetterPAL Plus	Empowering software	freewar	2002-06-04
	companion for communication	e	
	assistance by finger tip letter and		
	number selection. PLUS: PC		
	version DeskLetterPAL		
Pocket Surgery	The handheld version of Pocket	\$37.95	2002-06-04
	Surgery is perfect for those		
	students who need to access		
	information on patient care		
D'IID A Y	anytime and anywhere.	Φ2.00	2002 05 10
PillPAL	PillPAL is a simple scheduler for	\$3.00	2002-05-19
	one-time or daily recurring		
E D'IIDAT	medication reminders	C	2002 05 10
Free PillPAL	Simple scheduler for one-time	freewar	2002-05-19
Madical All 100	medication reminders	e •25.00	2002 05 10
Medical Abbreviations Distinguis (ABM)	The biggest Medical	\$25.00	2002-05-18
Dictionary (ARM)	Abbreviations Dictionary to day	\$25.00	2002 05 17
Medical Abbreviations Distinguis (SH2)	The biggest Medical	\$25.00	2002-05-17
Dictionary (SH3)	Abbreviations Dictionary to day	¢170.0	2002 05 00
<u>OPUS</u>	Dictation system for the PocketPC	\$179.9 9	2002-05-08
Evidence-Based Diagnosis	Designed to use in daily	\$64.95	2002-05-08
Evidence Based Blagnosis	practice, Evidence-Based	Ψ04.73	2002 03 00
	Diagnosis is perfect for all		
	medical practitioners on the go.		
ER Suite for Pocket PC	Award Winning combination of	\$64.99	2002-04-26
	ER&ICU ToolBox and	Ψ0,	2002 0 . 20
	PediSuite.Please review details		
	of individual products, PediSuite		
	and ER&ICU ToolBox.		
MyBody Suite for Pocket	L3's MyDiet, MyFitness,	\$29.95	2002-04-26
<u>PČ</u>	NutriData, and HealthCalc. Four		
	great programs at a great price -		
	OVER 40% OFF!		
NeoFax & 5mPeds [™]	A bundle for Pediatricians! This	\$99.95	2002-04-26
	collection includes 5 Minute		
	Pediatric Consult and NeoFax so		
	that you may keep up to date on		
	information for even your		
	smallest patients.		
<u>μ-Bio</u>	Biorythms	\$4.95	2002-04-17
Handy Medical Aid	Have you ever had an experience	\$5.50	2002-04-17
	of seeing your loved ones get		

Name	Description	Cost	Date Added
	hurt and you had absolutely no		
	idea on how to go about giving		
	them some First Aid? Here is		
	the solution		
PPC PreOP (SH3)	preoperative evaluation tool used	\$14.99	2002-04-17
	to produce a comprehensive		
	report		
PPC PreOP (MIPS)	preoperative evaluation tool used	\$14.99	2002-04-17
	to produce a comprehensive		
	report		
PPC PreOP (ARM)	preoperative evaluation tool used	\$14.99	2002-04-17
	to produce comprehensive		
	reports		
TNM Staging SH3	TNM Staging for ALL	\$14.99	2002-04-13
	CANCERS at your finger tips		
TNM Staging MIPS	TNM Staging for ALL	\$14.99	2002-04-13
	CANCERS at your finger tips		-
TNM Staging ARM	TNM Staging for ALL	\$14.99	2002-04-13
	CANCERS at your finger tips	,	
LetterPAL Plus	Empowering software	\$20.00	2002-04-13
	companion for communication	Ψ=0.00	
	assistance by finger tip letter and		
	number selection. With sound.		
LetterPAL	Empowering software	\$10.00	2002-04-13
<u>Ectteri i E</u>	companion for communication	φ10.00	2002 01 15
	assistance by finger tip letter and		
	number selection. With sound.		
Free LetterPAL	Empowering software	freewar	2002-04-13
<u> </u>	companion for communication	e	2002 0 . 10
	assistance by finger tip letter and	•	
	number selection		
Clinical Anethesia	The handheld version of the	\$59.95	2002-04-13
	Handbook of Clinical Anesthesia	407.70	_002 0. 15
	covers all aspects of anesthetic		
	management during the pre-,		
	intra-, and post-operative		
	periods.		
<u>CecilPktTM</u>	The handheld version of Pocket	\$59.95	2002-04-13
- Com no	Companion to Cecil Textbook of	Ψυν.νυ	2002 01 13
	Medicine puts essential and up-		
	to-date clinical guidance at your		
	instant disposal!		
NutriData for Pocket PC	Six scientific health calculators	\$9.95	2002-04-13
Trutilizata for Focket FC	and wizards	ψλ.λυ	2002-04-13
MyFitness for Pocket PC	Fitness for life! Multiple	\$15.95	2002-04-13
IVIYFILIESS TOT POCKET PC	Truness for fire: Multiple	\$13.93	2002-04-13

Name	Description	Cost	Date Added
	strength and aerobic programs,		
	logging, and much more!		
<u>FerriDiseasesTM</u>	The handheld version of the	\$59.95	2002-04-02
	"Diseases and Disorders" section		
	of Ferri's Clinical Advisor		
	contains all the critical		
	information that primary care		
	physicians need to know about		
DI ADM	medical disorders.	#15.00	2002 02 20
Plog-ARM	Point Logger for People who "Watch thier Weight"!	\$15.00	2002-03-29
Plog-SH3	Point Logger For People that	\$15.00	2002-03-29
110g-5115	"Watch Thier Weight"!	\$13.00	2002-03-29
PocketPoints	The easiest way to calculate your	\$9.95	2002-03-29
	diet points!		
BP Tracker	Track and graph your blood	\$10.99	2002-03-29
	pressure readings		
The Little Black Book of	The Little Black Book of	\$44.95	2002-03-24
Primary Care	Primary Care, 3rd Edition, a		
	reference that is useful for		
	primary care novices and experts		
	alike, is now available on your		
	handheld device!		
Weights	Weight Lifting Electronic	\$24.95	2002-03-24
	Journal	***	
Workout Wizard	Workout Wizard allows you to	\$10.95	2002-03-16
	enter all of your workouts into		
	your PDA, broken down by date,		
	exercise, weight, reps and sets. If		
	your exercise is not in our list,		
EDNotabook for the Dealest	you can add yours.	\$25	2002-03-10
FPNotebook for the Pocket	Full text of fpnotebook.com requires TomeRaider (Pocket PC	\$25	2002-03-10
<u>PC</u>	or Windows version only).		
	Compact HTML version is also		
	available. Covers over 3800		
	topics in 31 specialty areas.		
<u>HarrietLaneTM</u>	The gold standard reference for	49.95	2002-03-10
<u> </u>	pediatricians that represents 50	17.75	2002 03 10
	years of nationwide use for fast		
	and accurate bedside		
	consultation.		
My Last Cigarette - Extra	Didn't quit smoking? Try again.	\$24.95	2002-03-03
Strength			
Medical Abbreviations	The biggest Medical	\$25.00	2002-03-01

Name	Description	Cost	Date Added
<u>Dictionary (ARM)</u>	Abbreviations Dictionary to day!		
BioWin CE for Pocket PCs	BioWin CE shows your	\$5	2002-02-27
(MIPS)	biorythm. (health,Biorythm,		
	rythm,		
	feeling,curves,body,emotion,inte		
	lect,physics). Very comfortable		
	to use.		
HealthEngage Asthma	An easy, yet powerful way to	\$39.99	2002-02-27
PPC+Desktop Bundle	manage your asthma. Includes		
	the ability to store peak flow,		
	medication and note information		
	and provides a graphical		
ED & ICH Toolbox (Cost	summary of your data.	\$27.00	2002-02-27
ER&ICU ToolBox (CasE- 125/EM-500/EG-800)	Award winning, comprehensive Emergency & ICU software. A	\$37.99	2002-02-27
123/EM-300/EG-800)	product no Critical Care		
	Provider should be without.		
ER&ICU ToolBox	Award winning, comprehensive	\$37.99	2002-02-27
(Jornada 520/540)	Emergency & ICU software. A	Ψ57.77	2002 02 27
(voinada 320/3/0)	product no Critical Care		
	Provider should be without.		
ER&ICU ToolBox	Award winning, comprehensive	\$37.99	2002-02-27
(iPAQ/Jor560/CasE-200)	Emergency & ICU software. A	·	
	product no Critical Care		
	Provider should be without.		
PediSuite (Cassiop E-	Award winning, comprehensive	\$44.99	2002-02-27
125/EM-500/EG-800)	Pediatric software. A product no		
	Pediatric Healthcare professional		
	should be without.		
PocketPal Fast-Access	Information Access on steroids	\$17.99	2002-02-24
Medical Dictionary	Compact medical dictionary	\$19.00	2002-02-24
PocketPC (ARM)	with over 38,000 terms.	#00 0 =	2002.02.22
5-Minute Infectious	5mID TM (The 5-Minute	\$89.95	2002-02-22
Diseases Consult TM	Infectious Diseases Consult)		
	contains an easily digested		
	source of critical information		
	that can be applied instantly in		
Primary Care Medicine	managing infection. PCMRec TM (Primary Care	\$49.95	2002-02-22
Recommendations TM	Medicine Recommendations) is	ゆサラ.フン	2002-02-22
Recommendations	your portable decision-support		
	tool for quick answers to clinical		
	problems seen in the outpatient		
	setting.		
PktOBG TM (Pocket	PktOBG TM (Pocket OB/GYN) is	\$37.95	2002-02-22

Name	Description	Cost	Date Added
OB/GYN)	the source of fast-facts and need-		
	to-know information for		
	obstetrics and gynecology		
	residents.		
BioBody	Get the body you have always	\$13.99	2002-02-22
	wanted! Track your food and		
	workouts. Works well with the		
	Body for Life program.		
The 5-Minute Sports	5mSports TM is your reference for	\$79.95	2002-02-22
Medicine Consult TM	current diagnosis and treatment		
	for on-field and long-term		
	management of sports-related		
	problems.		
My Last Bottle by	Reduce your alcohol	\$14.95	2002-02-22
Mastersoft	consumption.	,	
The 5 Minute Toxicology	5mTox TM (The 5 Minute	\$89.95	2002-02-22
Consult TM	Toxicology Consult) is a true	40000	
	lifesaver in the frenzied world of		
	assessing and treating poisoned		
	patients.		
I Ching for the Pocket PC	This program helps you finding	\$10.00	2002-02-22
1 ching for the rocket re	answers to vital matters by using	φ10.00	2002 02 22
	the ancient Chinese oracle I		
	Ching (Book of Changes).		
iFacts TM with NEW	iFacts TM with New A2zDrugs TM	\$107.0	2002-02-22
A2zDrugs TM	are standard for medical	0	2002 02 22
<u>1122D1ugs</u>	practitioners seeking a high	U	
	quality compact drug reference		
	guide.		
OCM/911?	**FREE** OCM/911? (Outlines	freewar	2002-02-22
OCIVI/911:	in Clinical Medicine/Medical	e	2002-02-22
	Emergencies) is a FREE critical		
	resource with the latest		
	information on bio-terrorist		
	agents.		
IVmeds™	The handheld version of 2002	\$49.95	2002-02-22
1 v meds	Intravenous Medications, the #1	ψ τ 7.73	2002-02-22
	IV drug reference for 29 years!		
Sleep Tight (ARM)	Use SleepTight themes for 10	\$7.00	2002-02-22
Sicep Tight (AKWI)	minutes a day to relax your mind	\$7.00	2002-02-22
	and body		
Handy nationts	ž – – – – – – – – – – – – – – – – – – –	\$60.00	2002 02 22
Handy patients	Handy patients is a new patient	\$68.00	2002-02-22
5DtITM	tracking application for doctors.	06405	2002 02 22
5mDental TM	5mDental TM provides ready	\$64.95	2002-02-22
	access to specific information a		

Name	Description	Cost	Date Added
	dentist requires to improve point		
	of care.		
AnesthesiaDrugs TM	The handheld version of Soto	\$64.95	2002-02-22
	Omoigui's Anesthesia Drugs		
	Handbook, the complete		
	reference to essential anesthesia		
D MG : D : ::	medications.	#1.60.0	2002 02 22
Doc-U-Scrip Prescription	Easy to use new medical	\$169.9	2002-02-22
<u>& Note Writer</u>	software that allows providers to	5	
	create and print clear, precise		
	prescriptions, patient letters and		
	releases from an IRDA equipped		
AstroWin CE - Astrology	printer in just seconds! Preview version of astrology app	freewar	2002-02-22
for PPCs (MIPS)	AstroWin. Calculates radix	e	ZUUZ-UZ-ZZ
101 1 1 C3 (WIII 3)	(natal chart)/draws zodiac		
	w.signs, planets, houses (no		
	aspect in preview).		
AstroWin CE - Astrology	Preview version of the astrology	freewar	2002-02-22
for PPCs (SH3)	program AstroWin. Calculates	e	2002 02 22
	radix (natal chart, house method		
	placidus) and draws zodiac with		
	signs, planets, houses (no aspect		
	in preview).		
ObGynPocketPro (ARM)	ObGynPocketPro includes a	\$19.95	2002-02-22
	multifunctional DueDate		
	Calculator, ICD9/CPT codes,		
	Patient Counseling Images,		
	Gestational Diabetes Mellitus,		
	Teratogen, and Anomalies Risk		
0, 0.1	information		2002.02.22
Stop Calc	Calculate how long since your	\$4.99	2002-02-22
	last cigarette and how much		
ObCymPoglyotDro (MIDS)	you've saved ObGynPacketPro includes a	\$19.95	2002-02-22
ObGynPocketPro (MIPS)	ObGynPocketPro includes a multifunctional DueDate	ゆ 17.73	ZUUZ-UZ-ZZ
	Calculator, ICD9/CPT codes,		
	Patient Counseling Images,		
	Gestational Diabetes Mellitus,		
	Teratogen, and Anomalies Risk		
	information		
WU INSurv TM	The Washington Manual	\$29.95	2002-02-22
	Internship Survival Guide:		
	Provides the basics that every		
	intern must know from day 1 on		

Name	Description	Cost	Date Added
	the wards.		
ObGynPocketPro (SH3)	ObGynPocketPro includes a multifunctional Due Date Calculator, ICD9/CPT codes, Patient Counseling Images,	\$19.95	2002-02-22
	Gestational Diabetes Mellitus, Teratogen, and Anomalies Risk information		
Pocket Health	Calculate your ideal weight, body mass index, daily calories intake, target heart rate and keep track of all your family members health.	\$15.00	2002-02-22
PediSuite (Cassiop E- 125/EM-500/EG-800)	Award winning, comprehensive Pediatric software. A product no Pediatric Healthcare professional should be without.	\$44.99	2002-02-22
ER&ICU ToolBox (iPAQ/Jor560/CasE-200)	Award winning, comprehensive Emergency & ICU software. A product no Critical Care Provider should be without.	\$37.99	2002-02-22
ER&ICU ToolBox (Jornada 520/540)	Award winning, comprehensive Emergency & ICU software. A product no Critical Care Provider should be without.	\$37.99	2002-02-22
ER&ICU ToolBox (CasE- 125/EM-500/EG-800)	Award winning, comprehensive Emergency & ICU software. A product no Critical Care Provider should be without.	\$37.99	2002-02-22
CalorieWatch SH3	Calorie Watch is designed to keep a daily watch over your calories.	\$20.00	2002-02-07
CalorieWatch MIPS	Calorie Watch is designed to keep a daily watch over your calories.	\$20.00	2002-02-07
PatientLog (PPC,Mips)	Patient Log is an application for doctors and medical students.	\$30.00	2002-02-07
PregTracker (WinCE PPC,SH3)	PregTracker is the would be mother's little Pregnancy Management System.	\$30.00	2002-02-07
The 2000 Guide to Medical Resources	The most comprehensive directory of medical resources for PDAs.	\$4.99	2002-02-07
KeepFit (WinCE PPC,SH3)	If fitness is what you are looking for then this is the application.	\$25.00	2002-02-07

Name	Description	Cost	Date Added
StudyBuilder Professional	Database software for audit,	\$1,499.	2002-02-07
Edition 2001	clinical trials, registries and	00	
	patient management.		
CE ON-CALL W/	A solution for medical patient	\$24.00	2002-02-07
SYNCHRONIZATION	tracking, procedure tracking, and		
	keeping a peripheral brain.		
CE ON-CALL W/O	A solution for medical patient	\$15.00	2002-02-07
SYNCHRONIZATION	tracking, procedure tracking, and		
	keeping a peripheral brain.		
<u>DueDateCalc/MIPS</u>	A Due Date (pregnancy)	\$9.95	2002-02-07
	Calculator for Obstetric use.		
DueDateCalc/SH3	A Due Date (pregnancy)	\$9.95	2002-02-07
	Calculator for Obstetric use.		
HandyPalm Fitness	Track food intake and exercise	\$29.95	2002-02-07
	activities against targets you set		
	for yourself		
<u>ON-CALL</u>	PROFESSIONAL allows health	\$33.00	2002-02-07
PROFESSIONAL	care professionals to track		
	patient data and HCFA billing.		
<u>DueDateCalc/ARM</u>	A Due Date (pregnancy)	\$9.95	2002-02-07
	Calculator for Obstetric use.		
<u>BACGraph</u>	Blood Alcohol Concentration	\$17.00	2002-02-07
	calculator		
Bio Rhythm 2 for Pocket	A simple program that draws	freewar	2002-02-07
<u>PC</u>	your Bio Rhythm diagram (All	e	
	CPUs)		
Outlines in Clinical	A comprehensive medical	\$79.95	2002-02-07
<u>MedicineTM</u>	reference containing over 700		
	separate outlines covering		
	internal medicine.		
PediatricDrugs TM	A pediatric drug resource that	\$49.95	2002-02-07
	contains a complete database		
	with pediatric-sensitive		
	medications and hundreds of		
5 D 1 504/5 3 5	drug monographs.	Φ.(.) 2.7	2002 02 07
5mPeds TM (5-Minute	5mPeds TM (The 5-Minute	\$64.95	2002-02-07
Pediatric Consult)	Pediatric Consult):(formerly		
	5MPC) is designed for quick		
	consultation on problems seen in		
	infants, children, and		
ChadaDaill D. (adolescents.	¢4.000	2002.02.06
StudyBuilder Enterprise	Database software for audit,	\$4,999.	2002-02-06
Edition 2001	clinical trials, registries and	00	
	patient management via the		
	Internet!		

Name	Description	Cost	Date Added
StudyBuilder Personal	Database software for audit,	\$499.0	2002-02-06
Edition 2001 (CE)	clinical trials, registries and	0	
	patient management		
StudyBuilder Student	Database software for audit,	\$149.0	2002-02-06
Edition 2001 (CE)	clinical trials, registries and	0	
	patient management for students		
<u>FlashIt</u>	Flashcard application for the	\$6.95	2002-02-06
	Pocket PC		
<u>Archimedes</u>	The Intelligent Calculator for	freewar	2002-02-06
	Medical Professionals.	e	
<u>IconSpeak</u>	Pocket PC based assistive	\$205.0	2002-02-06
	communications aid for people	0	
	with impaired speech.		
PortaVie MedicalRecords	Tracks family medical records	\$29.95	2002-02-06
	including; doctor, health		
	conditions, immunizations, and		
	medications.		
WeightCalc	A calculator to accurately track	freewar	2002-02-06
	your weight.	e	
<u>DigiSoft reViewMD</u>	Use reViewMD to view static &	\$149.0	2002-02-06
	video images including DICOM	0	
	3 files anytime, anywhere.	Φ50.05	2002.02.05
The Washington Manual TM	**PRE-ORDER**Wash Med TM	\$59.95	2002-02-05
	(The Washington Manual of		
	Medical Therapeutics, 30th		
	Edition) is now available for the		
	Palm OS, Windows CE /Pocket		
Clinical Medical	PC handheld platforms. Reference text for medical	freewar	2002-02-05
<u>Compendium</u>	personnel.		2002-02-03
	The 5-Minute Orthopaedic	\$79.95	2002-02-05
<u>5mOrtho™</u>	Consult is now available for the	\$19.93	2002-02-03
	Palm OS & Windows CE/Pocket		
	PC handheld platforms.		
5mCardiac TM	5mCardiac TM (The AHA Clinical	\$79.95	2002-02-05
<u>Sincurdide</u>	Cardiac Consult) now available	ψ17.73	2002 02-03
	for the Palm OS, Windows		
	CE/Pocket PC handheld		
	platforms.		
Fluid Wizard Jornada	Fluid infusion calculation	\$7.99	2002-02-05
520/540 Series	software for the health	7,	
	professional.		
Fluid Wizard	Fluid infusion calculation	\$7.99	2002-02-05
iPAQ/Jornada 560 Series	software for the health		
	professional.		
	I I	1	

Name	Description	Cost	Date Added
iFacts - Drug Interaction	Contains more than 700 detailed	\$69.95	2002-02-05
<u>Facts</u>	monographs covering 3,500		
	brand and generic drugs and 70		
	plus therapeutic classes.		
Clinical Dermatology	Reference text for medical	freewar	2002-02-05
	personnel	e	
Clinical Trauma &	Reference text for medical	freewar	2002-02-05
Toxicology	personnel	e	
Clinical Neurology	Reference text for medical	freewar	2002-02-05
	personnel	e	
PediSuite (Jornada 520/540	Award winning, comprehensive	\$39.99	2002-02-05
<u>Series</u>)	Pediatric software. The first		
	program that can replace your		
	Harriet-Lane Guide.		
PediSuite (iPAQ/Jornada	Award winning, comprehensive	\$39.99	2002-02-05
<u>560 Series)</u>	Pediatric software. The first		
	program that can replace your		
	Harriet-Lane Guide.	.	
OCM-Internal Medicine TM	OCM is truly an ideal resource	\$69.95	2002-02-05
	for practicing internists, allied		
	medical professionals, medical		
	consultants, private practitioners,		
	and other healthcare		
	organizations.	Φ.CO. O.E.	2002.02.05
OCM-Family Practice	OCM is truly an ideal resource	\$69.95	2002-02-05
Edition TM	for practicing physicians, allied		
	medical professionals, medical		
	consultants, biotechnology and		
	pharmaceutical companies,		
5 Minute Clinical	hospitals, and other health.	\$C4.05	2002.02.05
5 Minute Clinical Consult TM 2002 Edition	5MCC 2002 TM is the latest	\$64.95	2002-02-05
Consult™ 2002 Edition	edition of this comprehensive		
	medical reference, now available		
	in the extremely popular		
	Skyscape format for Palm®, and WindowsCE®/PocketPC.		
ToyWigard (Jornada		\$19.99	2002-02-05
ToxWizard (Jornada	Medical Toxicology Software	\$17.77	2002-02-03
<u>520/540)</u>	that no health professional should be without!		
ToxWizard (iPAQ/Jornada	Medical Toxicology Software	\$19.99	2002-02-05
560 Series)	that no health professional	φ17.77	2002-02-03
<u>Joo Berresj</u>	should be without!		
topsE&M Coder	Increase income and HCFA	\$49.95	2002-02-05
iopsiscivi Couci	compliance with this E&M code	ψ 1 2.23	2002 - 02 - 03
	calculator. Works for any E&M		
	carculator. WOIRS for ally Excivi	<u> </u>	

Name	Description	Cost	Date Added
	category.		
Drip Calc (Jornada 520/540)	Award winning Emergency and Critical Care Medication Calculator, Now Available for PPC	\$24.99	2002-02-05
Drip Calc for iPAQ & Jornada 560 Series	Award winning Emergency and Critical Care Medication Calculator, Now Available for PPC	\$24.99	2002-02-05
Noteworthy Clinical Companion – IM	A patient tracking, procedure and case log productivity tool. This internal medicine version includes additional labs, patient education and drawing tools designed specifically for internists.	\$89.95	2002-02-05
Noteworthy Clinical Companion Cardio	A patient tracking, procedure and case log productivity tool. This cardiology version includes additional labs, patient education and drawing tools designed for cardiologists.	\$89.95	2002-02-05
5-Minute Emergency Medicine Consult TM	5mEmerg TM (formerly 5MEC) is a quick guide for practicing emergency medicine clinicians to turn to for immediate information that is accurate, pointed and readily encompassing.	\$64.95	2002-02-05
HarrietLane TM	**PRE-ORDER**HarrietLane TM (The Harriet Lane Handbook, John Hopkins Hospital, Fifteenth Edition) now available for the Palm OS®, Windows CE® /Pocket PC handheld platforms.	\$49.95	2002-02-05
<u>FerriGuide™</u>	FerriGuide™ (Ferri's Practical Guide to the Care of the Medical Patient, 5th Edition) now available for the Palm OS, Windows CE /Pocket PC handheld platforms.	\$49.95	2002-02-05
Noteworthy Clinical Companion	A patient tracking, procedure and case log productivity tool designed for clinicians by	\$69.95	2002-02-05

Name	Description	Cost	Date Added
	clinicians – ideal for residents, attendings, medical students, and private practitioners while on rounds.		
TNM Staging PC	TNM Staging for ALL cancers at your fingertips.	\$15.00	2002-02-05
iFacts TM , DrDrugs TM , & 5mEmerg TM	Skyscape smARTpak TM for emergency medicine with over 600 clinical topics. smARTlink TM integrates disease & drug book with unique analyzer for accessing drug interactions	\$164.9 5	2002-02-05
iFacts TM , DrDrugs TM & 5MCC TM	Skyscape smARTpakTM with over 4500 brand & generic drugs, 1000 clinical topics, 7500 terms & medications. smARTlink integrates disease & drug book with unique interaction analyzer.	\$164.9 5	2002-02-05
iFacts TM with DrugGuide TM	Skyscape smARTpak for nurses includes 5000 trade and generic drugs with 1000 drug monographs. smARTlinkTM integrates drug book, with unique analyzer for multiple interactions.	\$107.0 0	2002-02-05
iFacts TM with DrDrugs TM	Contains over 1,000 detailed monographs covering 4,500 brand and generic drugs, 130 drug classifications and interactions with over 2,700 drugs.	\$107.0 0	2002-02-05
iFacts TM with BONUS A2zDrugs TM	Contains more than 700 detailed monographs covering 3,500 brand and generic drugs and 70 plus therapeutic classes.	\$69.95	2002-02-05
DrugGuide™	Includes over 5000 trade and generic drugs, nearly 140 drug classifications and 700 commonly used combination drugs	\$49.95	2002-02-05
DrDrugs™	Includes over 4500 trade and generic drugs, nearly 130 drug classifications, 1000 drug	\$49.95	2002-02-05

Name	Description	Cost	Date Added
	monographs and 475 commonly		
	used combination drugs.		
<u>InfoRetriever</u>	just-in-time" information	\$275	2002-01-20
	focusing on POEMs: "Patient-		
	Oriented Evidence that Matters."		
<u>PediSuite</u>	Award winning, comprehensive	\$39.99	2001-12-04
	Pediatric software. The first		
	program that can replace your		
	Harriet-Lane Guide.		
Recall Series	Recall Series for your PDA	>=	2001-11-19
		\$29.00	
EMERGENCY!	Be Prepared! Vital information	\$5	2001-10-28
	in the fastest way possible. Let		
	your Pocket PC help when you		
	need it most!		
Medical Center	The best software for Medicals	\$295.9	2001-09-16
	centers	5	
PocketHealth	A personal health database in the	\$9.95	2001-09-08
	palm of your hand!	******	
WeightCalc	A calculator to accurately track	freewar	2001-09-08
- Transport	your weight.	e	
PocketLibrary	Allscripts TouchWorks Pocket	varies	2001-09-07
<u>rockethorary</u>	Library Series Titles - 5 clinical	by	2001 09 07
	trials (30 days free) and 1	module	
	freeware (PocketAnatomy)	. Free	
	downloads from Allscripts	to	
	Healthcare Solutions, the leader	\$54.95	
	in HCIT Clinical Handheld	Ψ54.75	
	Technology		
TalkNotes Portable	very accurate voice recognition	varies	2001-08-27
Turkivotes i ortable	for medical documentation	varios	2001-00 - 2/
www.healthengage.com	Software for chronic illness	\$29.99	2001-07-31
www.nearmengage.com	patients and doctors (the first	\$29.99 on	4001 - 0/ - 31
	release is for asthma) to chart,	sale/fre	
	monitor and track vital health	e trial	
	information	downlo	
Digital Dag	Universal SOAP format works		2001-07-14
<u>Digital Doc</u>		\$295	2001-07-14
	for all professions, all		
	specialties: Quickly create		
	comprehensive documentation		
	on the go. With a few selective		
	taps, your rapidly captured		
	patient data is turned into		
	narrative style charts, soaps and		
	reports.		

Name	Description	Cost	Date Added
PEPID	Portable Emergency and Primary	\$39.95	2001-06-26
	Care Information Database.	for 6-	
	Over 1500 medical	month	
	presentations, drug and herbal	subscri	
	remedies section, complete ED	ption	
	and organ-systems sections.		
<u>reViewMD</u>	a DICOM image viewer,	\$149	2001-05-22
	supports many other image file		
	formats including, MPEG-1 and		
	MPEG-2 video, BMP, 2BP,		
	JPG, JPE, JPEG, GIF, PCX,		
	PCD, TIF, TIFF		
Pocket Anatomy	a unique atlas of normal	freewar	2001-05-09
	anatomy, selected procedures,	e	
D :1	and disease states	020.05	2001 07 00
<u>Drugguide</u>	special version of the Lexi-	\$39.95	2001-05-09
	Comp Drug Information		
	Handbook, optimized for Pocket PC devices and the TouchWorks		
	Pocket Library reader.		
Pediatric Druguide	this title provides all the	\$39.95	2001-05-09
Pediatric Druguide	information necessary for	\$39.93	2001-03-09
	pediatric dosing and proper use		
	of medications for children and		
	infants		
Geriatric Druguide	Based on the Geriatric Dosage	\$39.95	2001-05-09
Serial Bragardo	Handbook published by Lexi-	ψ59.50	2001 02 03
	Comp, this title provides all the		
	information necessary for		
	geriatric dosing and proper use		
	of medications for older adults.		
Chili	a teleradiology system running	<=\$150	2001-04-30
	on the iPAQ	0	
Mobile MedData Personal	software for Chiropractors.	\$129	2001-04-22
<u>PocketChart</u>	PocketChart puts point-of-care	\$2499	2001-03-26
	functionality and a self-	inc	
	contained electronic medical	iPAQ	
	record in the palm of your hand.		
<u>Cairo®</u>	provides documentation	\$1995	2001-03-23
	management for the chiropractic		
	profession		
CE On-Call	tracking patient information	\$20	2001-01-03
MedCenter PocketPC	medical billing and patient	??	2000-12-06
	record software		
<u>Handheldmed Reader</u>	Handheldmed Book reader	freewar	2000-10-06

Name	Description	Cost	Date Added
		e	
<u>Archimedes</u>	Innovative specialty calculator	freewar	2000-10-02
	for the medical professional	e	
5 Minute Clinical Consult	very comprehensive and	\$64.95	2000-09-27
	structured clinical resource		
<u>LexiDrugs</u>	Complete database of more than	\$64.95	2000-09-27
	1500 drugs		
<u>PediatricDrugs</u>	complete database of more than	\$64.95	2000-09-27
	3,400 paediatric-sensitive		
	medications and 640 drug		
	monographs.		
<u>GeriatricDrugs</u>	complete database of more than	\$64.95	2000-09-27
	2,440 geriatric-sensitive		
	medications and 770 drug		
	monographs		
CardioDrugs	cardiology-related drug	\$64.95	2000-09-27
	information containing 374		
	generic drug monographs.		
<u>IDBook</u>	over 166 infectious disease	\$64.95	2000-09-27
	syndromes, 245 key tests and		
	procedures, 322 antimicrobial		
	agents and info on 152 infectious		
	disease organisms.		
<u>AnCCDrugs</u>	anaesthesiology and critical care	\$64.95	2000-09-27
	drug information resource		
<u>PsychiatricDrugs</u>	psychiatric drug resource that	\$64.95	2000-09-27
	covers over 4,000 brand names		
	and contains over 1,063 generic		
	drug monographs.		
<u>DentalDrugs</u>	covers over 5,000 drugs	\$64.95	2000-09-27
	commonly prescribed, by		
	dentists		
Outlines in Clinical	comprehensive medical	\$64.95	2000-09-27
Medicine	reference containing over 700		
	separate outlines		
<u>First Aid</u>	quick reference guide to step-by-	£5 (\$8)	2000-09-12
	step guidelines for emergency		
	first aid		

THIS PAGE INTENTIONALLY LEFT BLANK

APPENDIX D. KHAO LAK HOTELS STATUS IN MAY 2005

Closed until further notice
Some damage but hotel is still open
No damage, operating normally
No report

Hotel Name	Destination	Damage
Anantara Royal Coco Palm	Khao Lak	Closed until further notice
Andaburi Resort Khao Lak	Khao Lak	Operating normally
Andaman Princess Resort	Khao Lak	Closed until further notice
Andamania Beach Resort	Khao Lak	Closed until further notice
Baan Khaolak Resort	Khao Lak	Closed until further notice
Baan Krating Khao Lak	Khao Lak	Operating normally
Bangsak Beach Resort	Khao Lak	Closed until further notice
Blue Village Pakarang Resort Khao Lak	Khao Lak	Closed until further notice
Briza Beach Resort & Spa	Khao Lak	Closed until further notice
Emerald Resort & Spa	Khao Lak	Closed until further notice
<u>Haadson Resort</u>	Khao Lak	Closed until further notice
Hot Spring Beach Resort and Spa	Khao Lak	Closed until further notice
Khao Lak Bay Front Resort	Khao Lak	Closed until further notice
Khao Lak Bhandari	Khao Lak	Closed until further notice
Khao Lak Long Beach Resort & Spa	Khao Lak	Closed until further notice
Khao Lak Merlin	Khao Lak	Closed until further notice
Khao Lak Palm Beach Resort	Khao Lak	Closed until further notice
Khao Lak Paradise Resort	Khao Lak	Closed until further notice
Khao Lak Resort	Khao Lak	Some damage but still operating
Khao Lak Seaview Resort & Spa	Khao Lak	Closed until further notice
Khao Lak Sunset Resort	Khao Lak	Closed until further notice
Khao Lak Wanaburee Resort	Khao Lak	Closed until further notice
Khao Sok Riverside Lodge	Khao Lak	Operating normally
Khaolak Laguna Resort	Khao Lak	Closed until further notice
Khaolak Orchid Beach Resort	Khao Lak	Closed until further notice
Khaolak Orchid Resortel	Khao Lak	Closed until further notice
Koh Khao Resort	Khao Lak	Closed until further notice
Koh Yao Island Resort	Khao Lak	Closed until further notice
Krathom Moken Beach Resort	Khao Lak	Closed until further notice
Kuraburi Greenview Resort	Khao Lak	Closed until further notice
<u>La Flora</u>	Khao Lak	Closed until further notice

<u>Le Meridien Khao Lak</u>	Khao Lak	Closed until further notice
<u>Mukdara</u>	Khao Lak	Closed until further notice
Pakarang Resort	Khao Lak	Closed until further notice
Palm Andaman Beach Resort	Khao Lak	Closed until further notice
Palm Beach Resort	Khao Lak	Closed until further notice
Paradise Koh Yao Resort	Khao Lak	Operating normally
Seaview Resort and Spa	Khao Lak	Closed until further notice
Similana Resort	Khao Lak	Closed until further notice
Sofitel Magic Lagoon Resort and Spa	Khao Lak	Closed until further notice
Southsea Pakarang Resort and Spa	Khao Lak	Closed until further notice
Sunset Resort	Khao Lak	Closed until further notice

INITIAL DISTRIBUTION LIST

- Defense Technical Information Center Ft. Belvoir, Virginia
- 2. Dudley Knox Library Naval Postgraduate School Monterey, California
- 3. Brian Steckler Naval Postgraduate School Monterey, California
- 4. James Ehlert Naval Postgraduate School Monterey, California
- 5. Dan Boger Naval Postgraduate School Monterey, California